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Surgery.

NITROUS OXIDE ANESTHESIA IN GENERAL SURGERY.

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My second article on this subject, published in the Medical Century, January 15, 1894, brought to the editor and writer a number of letters requesting more detailed information. I informed the genial editor that the element of "insufficiency" was due, not more to the incompleteness of the article than to the typographical errors—for which, of course, the printer's devil was responsible. It is true, however, that in that article I said nothing about the technique, and as that seems to be what our correspondents desire, I shall, at the present time, refer to that briefly. To aid in this, I present cuts of the apparatus in use. (See frontispiece and cuts.) With reference to its administration and action I have not materially changed my mind and may repeat some of my observations published last November.*

To some, the further study of this subject may seem unnecessary, to others, even unwelcome; but I wish it to be understood that I am not writing for those who feel that ether and chloroform anesthesia is so near the summit of perfection that there is no room above it. Such associate a degree of mental quietude with their surgery that I have envied but never possessed. This is written for the man (as Van Lennep says) with a "surgical conscience," who recognizes not only the tardy action and disagreeableness of our ordinary anesthetics but their *dangers as well*, men who, like Burke, deem it "better to be despised for too anxious apprehension than ruined by too confident a security."

The process of anesthesia has been divided into three stages, namely, exhilaration, excitement and relaxation. From having experimented with it upon myself several times, and from watching its effects on others, I should be inclined to regard the stages as follows: First, stimulation, then anesthesia, and, later, cyanosis. And I believe it possible to avoid the latter and confine the action of the gas to what I term the second stage, i. e., complete anesthesia without cyanosis or asphyxia, at least, to any alarming degree. It is not always possible to differentiate these stages, as in ether or chloroform anesthesia the stages may be confluent. The ability to exhibit the gas in full quantity at the beginning without producing distress, the rapidity of its action in overcoming sensibility, and its equally rapid elimination as soon as administration is suspended, are features that are peculiarly characteristic of this anesthetic, and absent in the others. Another fact is, that nitrous oxide practically defies the law of stimulation and depression. That is to say, that stimulation, whatever its degree, is followed by a depression in proportion to the exhilaration or exaltation preceding it. This is a regretful truth as regards ether or chloroform, but cannot be said of gas, and hence is removed one of the strongest factors in the production of surgical shock. That the gas has not been understood is shown by the following quotation from Dr. Turnbull's Anesthetic Manual:

"After numerous experiments on man and animals I have arrived at the following conclusion:

"Nitrous oxide has a very limited range when given alone, owing to the rapidity of its action and its still more rapid elimination."

For years Turnbull's work has been one of the authorities on anesthesia, and has done much to fashion professional opinion on this subject. And his conclusion (in reference to the limited range of nitrous oxide) agrees exactly with that of the medical mind generally, but the cases already cited show this to be an error. And, curiously enough, the very reasons that he gives for his conclusion that the range of gas is limited are the reasons that, in part, have led me to conclude that its range is almost limitless.

The aphrodisiac effect of nitrous oxide is a certainty. I have observed it myself and so have many others. Zeigler says: "It has a special tendency to the genito-urinary organs and exerts a powerful influence over their functions." Dr. Johnson also says: "Anesthetics do stimulate the sexual functions," but from my own experience I believe none of them so much so as nitrous oxide.

So far as my reading goes I am unable to find any contra-indications to its use, nor in my experience have I found any, nor can I imagine any. Although I believe that lesions of the heart, lungs or kidneys offer no contra-indications, I do not go quite so far as Underwood who says: "Organic disease does not involve any additional risk whatever to the patient." A chain is weaker for having an imperfect link; anesthesia is a departure from the normal, and any lesion of the vital organs (while it does not contra-indicate the anesthetic) must necessarily augment the departure from the basis of safety.

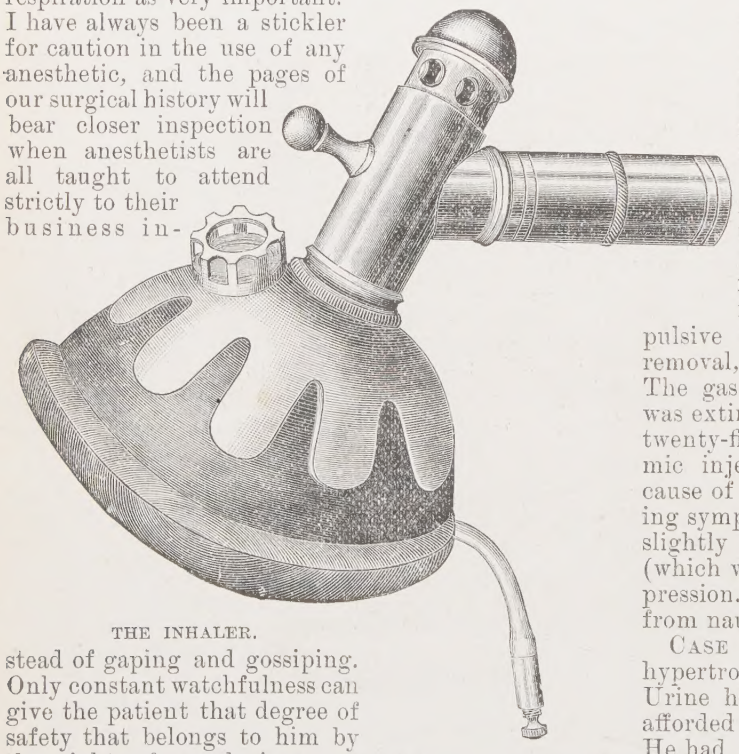
I have never tried gas in an alcoholic, but should expect the alcohol in the system to interfere, to some extent at least, with its action. At any rate I am painfully aware that the stronger anesthetics (so called) are more or less interfered with by alcohol.

* Southern Journal of Homeopathy.

Before the administration of gas I observe all the rules generally laid down for other anesthetics. I make all the usual preparations for complications, although I have not seen any as yet. Cardiac and respiratory stimulents, tongue forceps, gag, etc., should always be at hand. The patient should be watched constantly and the conjunctiva palpated, as a measure of insensibility. By watching the face we can prevent asphyxia, which is ushered in by a dull bluish or grayish pallor overspreading the countenance. This is apt to be accompanied by spasmodic or jerky respirations, and sometimes stertor. The first appearance of these changes demands that the amount of gas flowing into the inhaler be diminished, or it may be suspended for a few seconds.

The flow of gas is regulated by the amount of pressure exerted upon the upper portion of the inhaler.

I have noticed but little change in the pulse or the pupils; but should either heart or respiratory organs fail the same rules would apply here that are so familiar in similar conditions arising so frequently from ether and chloroform. Beginners are apt to be unnecessarily alarmed by the blue tingeing of the skin. In the case of gas I should regard artificial respiration as very important. I have always been a stickler for caution in the use of any anesthetic, and the pages of our surgical history will bear closer inspection when anesthetists are all taught to attend strictly to their business instead of gaping and gossiping. Only constant watchfulness can give the patient that degree of safety that belongs to him by the right of employing a reputable surgeon and entrusting his life in his hands. As White has said: "Immunity from danger can best be assured only by an intelligent and watchful guard, and the anesthetic should be suspended while yet the centers governing respiration and circulation are not too profoundly impressed."



THE INHALER.

In my earlier studies with gas I reported three operated cases over seventy years of age, and inasmuch as age, with its associated debilities, offers the highest degree of encouragement to anesthetic complications—either incidental or subsequent to operation—I append a few more senile examples.

Cases I, II and III previously reported.

Case IV. ——, aged seventy-five. Mammary carcinoma; extirpation. She moved some at first, but by pushing the anesthetic, she was satisfactorily controlled. Twice the pulse was transiently depressed, but not sufficiently to demand any treatment. Time, twenty-five minutes. No shock, nausea or vomiting. Uneventful recovery.

Case V. ——, aged seventy-four. Large papilloma of the bladder. He had already reached the break-down in catheter life, and for months had been bleeding copiously from the vesical growth. His skin was white and waxy, and even the conjunctiva and lips were pale from the loss of blood. There was also an easily discoverable aortic insufficiency. The pupils were small and unequal in size. The urine was loaded with pus, and horribly offensive. The bladder was opened and the growth removed through the supra-pubic route, and the bladder was stitched to the abdominal wall and drained. Time under anesthesia, one-half hour. Although his preoperative condition was most unpromising he seemed not the least depressed by the operation. Consciousness returned in one minute, unaccompanied by shock or nausea. Previously existing uremia, and sepsis from the horribly fetid urine pouring over the abdominal wound, were responsible for his death, which occurred about two weeks later. Lydston reports two similar cases.

I have, before this, published my opinion that there would be fewer post-operative deaths from uremia, with gas as the anesthetic than with ether or chloroform. Nor does the above case shake my faith in this regard: for I did not recommend gas as a therapeutic agent for uremia ante-dating operation.

Case VI. ——, aged seventy-four. Schirrhus mammæ. This patient was very feeble; nutrition impaired, the respiratory capacity much diminished, and in consequence the respiration and pulse were both rapid and feeble. The growth was ulcerated and repulsive to her, and for this reason she desired its removal, although a guarded prognosis was given. The gas controlled her perfectly while the breast was extirpated and axilla opened. Time under gas, twenty-five minutes. She was given one hypodermic injection of brandy during the operation, because of the quickening of pulse; though no alarming symptoms presented themselves. The pulse was slightly accelerated when consciousness returned (which was in three minutes), but there was no depression. Her spirits were good, and she was free from nausea. Uneventful recovery.

Case VII. ——, aged seventy-nine. Prostatic hypertrophy. Had been suffering for three years. Urine had become fetid and catheterism no longer afforded relief. The pupils were small and unequal. He had a marked aortic regurgitation. Treatment, gas anesthesia, high cystotomy and permanent drainage. Anesthesia was perfect, and consciousness returned in one-half minute after removing the inhaler and he laughed and joked before he was lifted from the operating table. Length of time anesthetized, twenty-three minutes. Uneventful recovery.

Case VIII. Mrs. W——, aged seventy-six. Mammary carcinoma, recurrent. Exsection, and covering with sliding flaps. She evinced not the slightest sign of sensibility. Time, thirty minutes. No shock, nausea or vomiting. Recovery.

Through the kind co-operation of Dr. Hawxhurst, our hospital analyst, careful analyses of the urine have been made before and after operation. The only case in which any very important changes occurred was the preceding one. Both analyses are appended:

BEFORE.

Physical Properties.

Color	Yellow	Appearance	Clear
Odor	Urinous	Reaction	Acid
Sediment	Flocculent	Spec. grav.	1010

Normal Constituents.

Urea	2.06 per cent	Indican	
E. Phosphates	Normal	Chlorides	Normal

Abnormal Constituents.

Albumin	None	Sugar	None
Pus	None	Blood	None

Microscopical Examination.

No pathological deposit.

AFTER.

Physical Properties.

Color	Yellow	Appearance	Cloudy
Odor	Urinous	Reaction	Acid
Sediment	Flocculent	Spec. grav.	1016

Normal Constituents.

Urea	2.18 per cent	Indican	
E. Phosphates	Normal	Chlorides	Normal

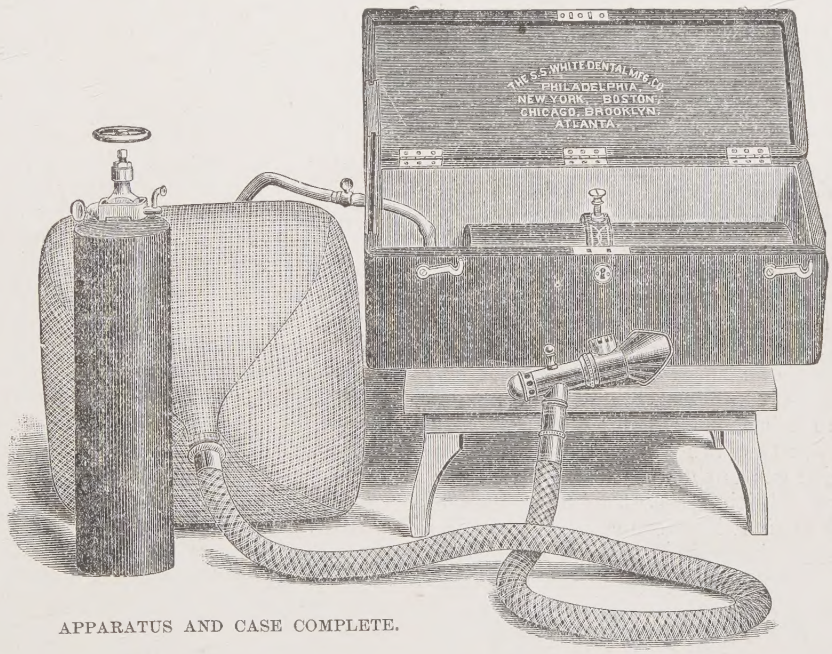
Abnormal Constituents.

Albumin	None	Sugar	None
Pus	None	Blood	None

Microscopical Examination.

A few hyaline and many small granular casts, no crystals.

This case is of interest, because when operated on two years previously, with ether as the anesthetic, the subsequent nephritis was of such a grave character that we were much in doubt as to the recovery of the patient. And yet, with the addition of two years to her already existing senility, which, in the natural order of things, should enhance the tendency to post-operative nephritis, the second attack produced only the mildest constitutional disturbance. This consisted of a slight furring of the tongue and loss of appetite. Convalescence was not noticeably retarded.



APPARATUS AND CASE COMPLETE.

It will be noticed that in the post-operative analysis the urea is increased. I find this change to be the most marked and constant.

Case IX, female, aet. seventy-six, suffering from an ante-auricular cyst. She was bowed and feeble. Examination of the chest disclosed Corrigan's disease, well marked. General atheroma was also noted. The mechanical presence of the cyst, which was growing rapidly, caused her considerable pain and hence she desired its removal. This was done under gas anesthesia, lasting thirty minutes. No shock, nausea or vomiting. Recovery.

Senility, with its attending feebleness and particularly co-existent organic diseases, may make a minor operation a major one, not as regards its performance but as far as danger to life is concerned. And this is a class of cases to whom nitrous oxide may be administered with confidence.

Within the last few months a report of operations upon patients aged seventy or more shows that several deaths resulted after minor operations. Of course the fatality was properly attributed to ether or chloroform and not to the operation *per se*.

I have remarked before that, sooner or later, I expected to have shock follow operations done under gas anesthesia, but so far I have not seen such. This is due to what I have before referred to as setting at defiance the law of stimulation and depression. In some way it seems to have a compensatory action. So decided is this that I have used only one hypodermic injection since I have been operating under nitrous oxide anesthesia.

The following case illustrates how little nitrous oxide disturbs an unstable vitality:

Mrs. M.——, aged forty. Areolar hyperplasia, granular endometritis and uterine myomata. She had been bleeding more or less constantly for six months (previous curettement had proven of little avail). She was almost exsanguinated. She complained of ringing in the ears. The skin was marble-hued and the mucus membrane pale. She was of the flabby, tea-drinking variety, with the usual mitral murmer, small, flat pulse, and a floundering heart. In short, she was a surgical asthenic, if there ever was one. Treatment: Pratt hysterectomy, with slight modifications. Time under anesthesia, fifty minutes, which included pre-operative mechanical and chemical cleaning and the toilet after operation. One of the growths was the size of a hen's egg, the other smaller. That the operation was tedious and prolonged was not Pratt's fault, but because of the individual characteristics—general uterine hypertrophy, vascularity, and, what was worse, the hemorrhagic tendency due to diluted fluids, and the consequent diminished coagulability. She talked and mumbled somewhat, but there was perfect muscular quiescence. Consciousness returned before being lifted from the operating table. The subsequent course was without a sign of shock.

This freedom from nausea, vomiting, shock, sweat, frigidity, bronchial and laryngeal irritation, and especially its rapidity of action give gas the first place as an anesthetic for painful secondary dressings, examinations, etc.

In a recent clinic our gas was exhausted, and it became necessary to use ether. The patient was wheeled in from the anesthetizing room, and the heavy, unwelcome, stertorous breathing contrasted strangely with the gentler respiratory efforts under

gas. It was a case of hip-joint sequestrotomy, and the rapid, rythmic and forcible tremor of the legs and thighs spattered the irrigating fluid from the Kelly pad was difficult to overcome and exhibited another objectionable feature that we have never seen gas produce. In fact, it seemed like going back to barbarism, to produce so many unnecessary disadvantages while producing the necessary degree of insensibility. Candidly, the writer felt that this thought was the outgrowth of his admiration for gas, but after the operation, our interne, Dr. Seward, who can scarcely be regarded as an enthusiast (though now a skillful gas anesthetist), remarked: "This case has shown me that gas has spoiled me as an admirer of ether."

It must be admitted that it is more tiresome to administer than chloroform or ether, but this is generally compensated for by the knowledge that the patient is much nearer the basis of safety.

Years ago there were some deaths reported. Some were from foreign bodies in the respiratory tract, and some were thought to be due to the gas. These reports were co-incident to the period when each dentist manufactured his own nitrous oxide, but I have been unable to find the report of a single death during the period of years in which the reliable manufacture of portable liquified gas has been carried on.

The anesthetist generally appreciates the fact that he is not obliged to "hang around" any length of time, in private practice, while the patient recovers consciousness.

I am satisfied that the expense and much of the inconvenience would be overcome if this form of anesthesia were more generally used.

I am frequently asked if nitrous oxide does not always produce laughter. It is rather the exception when it does. I recall only one marked case.

For a time I did not consider gas a suitable anesthetic for operations upon the perineum, but later I found it quite satisfactory in perineal, cervical and rectal work. And one thing to be remembered is that many patients who need operative treatment will not submit to it because of their horror of ether and chloroform, but they are perfectly willing to be operated upon with gas as the anesthetic.

The matter of additional cost of nitrous oxide should not weigh against its more general use; for in private practice the increased expense is borne by the patient, not the surgeon. Dentists frequently charge ten dollars extra for gas and the people are equally willing to pay for it for general surgical purposes. And for that matter I am proud to say that true surgical generosity so infects a large portion of our profession that a few paltry dollars is not weighed against anything that adds to the comfort or decreases the dangers to a human life.

OUR SURGICAL REMEDIES.

By HOWARD CRUTCHER, M. D., Chicago.

PROF. PRINCIPLES OF SURGERY, HERING MEDICAL COLLEGE.

One of the most gratifying facts of our Homeopathic healing art is, that many conditions classed as surgical by the old school are cured without operative measures by the appropriate medicine.

Tumors of all kinds, glandular enlargements, fistulæ, fissures, ulcers and many forms of bone disease are now attacked with the knife without hesitation, because no other means of relief are known to those ignorant of the efficacy of Homeopathic agencies.

In the first place, a close prescriber of Homeopathic remedies will find the field of operative work steadily lessened. Tracheotomy, intubation of the larynx, urethrotomy, ovarian operations, and scores of other procedures will be necessary in very rare instances where the case has been under rational treatment from its incipiency. I have been called to perform tracheotomy in two instances, in both of which the patients were cured without the use of instruments. Urethral stricture is the result of harsh injections which may suppress a discharge but do not cure the patient. Mr. Lawson Tait is authority for the statement that a very large share of his abdominal work is the direct result of meddlesome and irrational treatment. The time is coming when the differences between cure and suppression will be so clearly understood that the now unconscious victim of ignorance will demand something more than he knows enough to demand today. I have under my care today a patient whose bladder is the seat of a malignant growth, the direct result of years of sound-passing, astringent washes, and harsh mechanical treatment. The indicated remedy has not, and will not cure him, but it has for twenty-two months kept his pain in check and has apparently prevented the extension of the trouble. He transacts business with comfort and rarely has more than a passing spell of pain. Four years ago a well-known surgeon, who believed himself a Homeopath, assured the patient that his only possible hope of relief lay in a perineal section, to furnish a drainage outlet.

Ten months ago a young man received a wound in the thigh from a spike. A profuse discharge of pus kept up in spite of heroic local treatment. The diseased track was at last cauterized with nitrate of silver. This was followed by pyæmia and death in six weeks. The medical attendant gave the cause of death as typhoid fever. Two thousand dollars accident insurance money was involved. The parents consulted me and I gave a strong written opinion that the cause of death was pyæmia. It is gratifying to know that my services to the family resulted in the payment of a thousand dollars by the insurance company.

Some years ago a Mrs. B., aged 29, was afflicted with a troublesome leucorrhea, for which she consulted a well-known gynecologist. The discharge was suppressed quite rapidly. Soon thereafter she began to suffer intolerably from dyspepsia and conjunctivitis. For these she was treated unsuccessfully for years by eminent practitioners without any result save steady aggravation. When she applied to me her eyesight was nearly gone. She had been tortured without benefit by a score of oculists, including two of the most eminent of New York City. *Sulphur* nearly cured her, and the successful termination of the case under *Pulsatilla* was very satisfactory.

These cases are given in proof of the statement above made that suppression and cure are totally different results. And, indeed, it does seem remarkable, perhaps inexplicable, that professed Homeopaths will confuse cause with effect as many of them do. Rational physiology clearly teaches that nature does nothing without a reason; there is always method in her movements, and instead of thwarting and resisting her decrees our duty lies in coöperating with her. Nature never begins a discharge, never throws out an eruption, never deliberately establishes a destructive process without a reason satisfactory to herself. Whether this reason satisfies us is not the question. We can no more explain her reasons, in many cases, than we can explain the *modus operandi* of the action of remedies. Nature acts, and remedies act or fail to

act; and this is as far as positive knowledge can, in many instances, go.

Accurately speaking, our surgical remedies include nearly the entire list of our medicines. There are some, however, more prominent in the surgical field than others, and these I shall outline briefly.

For shock, *Camphor, Veratrum album* and *Carbo vegetabilis* are pre-eminent. Coldness is the main feature of *Camphor;* blueness calls for *Carbo vegetabilis*, and the well-known cold sweat on the forehead and over the body points to *Veratrum album.*

I have repeatedly witnessed the efficacy of these remedies in surgical shock. One case is recalled where exceedingly brilliant results were obtained from *Carbo vegetabilis.* The patient seemed to be sinking deeper and deeper into the depths of shock from which it apppeared there would be no awakening. I gave the remedy in water and repeated it several times. Its action astonished the attendants The patient recovered entirely.

For the effects of hemorrhage, *Aconite, China* and perhaps *Arsenic* are invaluable. *Aconite* is indicated by the distressing restlessness and tossing about, and is useless where its peculiar mental state is absent.

The savage thirst immediately following loss of blood is frequently controlled most admirably by *Arsenic.* When the acute symptoms have subsided no medicine equals *China.* I have noted its splendid effects time and again and can bear testimony to its great curative powers in these conditions.

For the control of hemorrhage we have a score of medicines whose efficacy is too well known to require mention in this place.

After some operations upon the abdomen *Staphysagria* deserves especial mention for its power to control subsequent pain. In two cases I have observed substantial benefit from its administration.

To control painful surgical conditions we have at our command some remedies whose powers are far-reaching. Intolerable tearing pains in a wound or stump called for *Coffea*; moderate pain with great restlessness demands *Aconite*; sharp, darting pains along the line of the incision are generally relieved promptly by *Ledum.*

In chronic abscess, in bone diseases, in diseases involving the ligaments and the glands, our medicines deserve unmeasured confidence.

The *Silicia* patient is cold, objectively and subjectively—his movements are sluggish; his sores are slow in coming, slow in healing; the pus is offensive.

The *Hepar* patient is more quickly attacked, is inclined to heal more rapidly; his wound is more active; and his discharges are less offensive.

The *Calcarea* patient is sweaty—blue-eyed, fat or lean but always flabby. His wounds leave large scars; his neck is enlarged somewhere; his joints are loose. A patient with a long scar in the carotid triangles and with a pair of crooked legs always calls for *Calcarea.* The pus is thin and runs easily—as a rule.

Phosphorus presents a sensitive wound; it bleeds freely; it appears angry and fiery red, or perhaps pale, but always ready to bleed in a stream; the patient is tall, spare, red-headed and freckle-faced. He is constipated and has at times some indefinite trouble with his bladder.

Lachesis presents a blue wound; big veins; probable slough; much dead tissue in wound; worse mornings; tendency to the formation of sinuses. Pus thick and flaky.

In the management of dislocations my experience is that *Rhus* is our best medicine, because indicated most frequently. Within three weeks I have had a number of cases of dislocated shoulder, in patients of all ages, and *Rhus* has been of great service in their after-treatment. In none of my cases has there been extensive injury of the soft tissues.

These observations are merely suggestive. They indicate the lines along which we must work if we hope for the best results. The subject is vast in its application and would require a volume of large dimensions for its proper elucidation; but enough has been given to show how enormous is the advantage possessed in surgical work by one who applies the principles of rational therapeutics in the treatment of his cases.

Gynecology.

STERILITY.

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Fruitage is the ultimate object of life. It is that function of nature which out-ranks every other and which exacts tribute from every process of being. Every part of the living organism is keyed to the note of reproduction, and is ordained to assist in the accomplishment of that purpose. This is the highest expression of physical life; it is the goal of physical ambition; it is the one representative act of the organism. All this is plainly written in every domain of life. Plant and animal alike are dependent upon seed time; upon conditions favorable to reproduction; upon that fact accomplished. Everywhere in still life and in all the lower forms of animate existence as well, reproduction seems to be the sole object of being; creation or recreation the only function. This is instanced in the lives of some of the insectivora whose males mature only to make a single copulation and die—the parental act being the death of them. In the higher orders of the animal kingdom, while self-perpetuation does not seem to be the only object of existence, and the giving of other life is not followed necessarily by the extinction of the life of one or other of the progenitors, the fact remains that this is the highest and noblest function of life and is dependent upon the most harmonious expression of the mature life-forces.

Reproduction, then, is not the work alone of a pair of organs, male and female, but the product of two organisms, harmonious and vigorous within themselves, drawn into the closest unison. It is the resultant of the conjoint expression of two entire natures acting in sympathetic relation and completely and wholly absorbed by one emotional, physical and intellectual thought—the giving and the taking of the uttermost. From such an anvil the divine spark is struck off which we call life; under such conditions the spring-off or off-spring of entity is permitted. He who would cope, therefore, with the problem of Sterility has very much to think about. It is a "no pent up Utica" that confronts him. This is a question that may involve the whole domain of medical science and may call for the exercise of all the knowledge possessed by the profession.

From the foregoing it follows that I cannot, in one brief paper, treat this subject in an exhaustive way. I can only hope to etch the main lines or state briefly the questions involved.

Numberless instances will occur to every practitioner where impregnation has occurred without full and complete cohabitation; where the female has

been unresponsive, apathetic, or acting under protest; and examples are given where fructification has resulted after artificial and mechanical intervention—even without sexual contact. But all these are exceptional and a grievous deprivation to the third party to every such transaction, inasmuch as every human being has rights antecedent to birth-rights, viz: generation-rights. He has the right in his begetting to the full complement of the best endowments of both of those who precede him, wrought in all the fulness of divine provision. Anything less than this is a parsimonious inheritance and may account for much mental, moral and physical deviousness in the out-put. It is very clear that the part the parental souls play in procreation cannot be left out without great detriment to themselves as well as to the resultant. While under such circumstances another human being may be landed on the shores of time he is verily a shipwrecked mariner from the start, and his progenitors are in a state of divergence. Whether they are conscious of it or not they have already begun divorce proceedings.

This psychological lack in marriage is a more pronounced factor in the production of barrenness than we have hitherto supposed—leading to frequent impotency and sterility in the male as well as the female. Such incompatibles do not often desire children, or the desire being one-sided relief is not sought. It is now known that the major part of the reasons for conjugal infelicity is dependent upon sexual disparity and incompetency, and that the right person to be applied to in all such unhappiness is not a divorce lawyer, but a good gynecologist. When both parties are in normal sexual condition and well mated, as it is termed, marital tempests will be little heard of, and infertility the rare exception. As it is, a large per cent of marriages are unhappy and barrenness is common. It has been determined approximately, after long statistics, that one marriage in every ten is unfruitfnl, and that in every tenth case the fault lies in the male.

To beget a child it is physically requisite that a healthy spermatozoid shall meet a mature ovum under right conditions in utero. It is necessary that there shall be insemination, ovulation, impregnation, gestation and parturition. It is a question merely of good seed, germinated, grown to maturity in good soil and properly plucked at the harvest. If seed does not sprout it means either that it has been blasted or that the conditions for sprouting have not been complied with. This, in a nut-shell, is the whole problem of sterility. Do both parties in the case desire a child and do they make honest efforts to obtain one; is the semen virile; are there impediments either in the male or female to its proper carriage to the cavum uteri; is the maternal field in a receptive state or is it what may be denominated stony ground—untillable soil; are there interferences with healthful ovulation and the transmission of ova to the common nesting-ground of the endometrium where ultimate embrace and growth must follow?

Properly the male should be the first witness. Can he establish his capabilities? Is he free from physical debility or deformity? Have diseases incidental to a lecherous past incapacitated testes or vasa deferentiæ? Is his physical battery full-charged or has he somewhere a ground-wire that is wasting his substance before the call?

Aside from the requisite soul-affinity that is wanting to draw him out at his best there may be some embarrassed nerve-terminal in one or the other of his great inferior conduits. Though wholly unannounced hitherto, such may be entirely responsible for the disappointment. Is the prepuce redundant, or adherent, the frenum too short, the meatus occluded and the urethra in all its extent healthful and normal? Do the ring-muscles anywhere in the pelvic region clamp a sensitive? You cannot be too rigid in this determination of normal relationship and functional ability.

Following this, interrogate the female. All questions that concern the general health as well as those having special reference to pelvic topography must pass under review. Has she the record of maturity both as to development and function? Is she essentially feminine or are there masculine traits and instincts in both body and mind? Is she sexually positive or sexually negative, and if the latter, why? Can she successfully plead "not guilty" to the unnumbered counts in the physical indictment?

This may require the most rigid and long lasting cross-examination to determine. Let no party to the investigation under-estimate the magnitude of the undertaking. Reeves Jackson, for instance, found in the treatment of seventy-two cases, forty-five separate causes for the defeat of fecundity. This was before the vast extension made in the domain of this art within the last half-decade. It was before the acquisition of wider knowledge of disease-genesis through the agency of the sympathetic nervous system. It was before the clearer perception of functional defeat furnished by the orificial philosophy. Since that time many irritations before considered too trivial to attract notice have taken front rank in pathology, and the etiological horizon has been expanded accordingly.

The physical balance is more delicately adjusted than any scales ever made by man; and it may take only the thousandth part of the weight of a hair to turn it. The mind must be fully harmonious with this thought or there can be no scientific progress in the treatment of the subject. It is a question not only of the gross abnormities of form and function, but of the lesser and apparently insignificant conditions as well; the remote, as well as the near; and sometimes the intangible and the ill-defined as well as the perceptible and the well-pronounced.

The abnormities of nutrition, following obesity, anæmia, tuberculosis, secondary syphilis, or latent gonorrhœa; the abnormities of anatomy instanced by adherent clitoris; urethral neoplasms; labial tumors; persistent hymen; occluded or stenosed vagina; the various uterine flexions, versions and displacements; uterine non-development or hyper-development; conical cervix; small cervix; stenosis or atresia of os externum, os internum or cervical canal; the abnormities of function in the bladder, the rectum, the vagina, the uterus, the Fallopian tubes and the ovaries, which in multiform variety may lead to loss of equilibrium through sympathetic nerve-irritation—the inertia of paralysis, or the hyper-sensitive conditions incident to congestions and inflammations in every pelvic tissue—all these are but a moiety of the conditions that claim the attention and demand correction. And to these must be added the objects of wider view, viz: the pelvic tumors, abscesses, adhesions, fistulæ and plastic malformations that may cast a baneful shadow across the track of genesis.

It is just as necessary that a mature ovum shall travel outward as far as the endometrium as that a virile spermatozoid shall travel inward to the same center. The work of the gynecologist is to insure these two possibilities, and in addition to see to it that the uterine mucosa is in a state favorable to gestation.

In these days of sexual perverseness the via materna —from ostium vagina to fimbriated extremity—may have been burned over by that devastating conflagration known as gonorrhœa, searing and indurating the mucosa; sealing the tubes or leaving them in gleet; binding down the fimbræ or curling them up so that the beautiful instinct of coaptation may not be possible at the extrusion of the ovum from its matrix, and thus forcing the seed to fall by the wayside. Or, the uterine mucosa may have been sinned against so long through the voluntary and damnable practices of abortion that its entire surface has been scarred over—thus making one immense cicatrix as leathery and impervious as gristle—the fertilized ovum finding no more lodgment and rooting opportunity upon it than it would on a tin roof.

But while the problem of etiology is vast, the problem of betterment is still vaster. Many of the conditions encountered are amenable to wise treatment. The whole object is to restore normal equilibrium, and this may call for anything and everything therapeutic known to the adviser.

I shall not go into all the details of gynecological practice touching all these abnormalities enumerated. The mere mention of them is to tell what to do with them. Electricity, massage, the indicated remedy, the banishment of mal-positions, the emancipation of every sympathetic nerve-filament through the use of any of the many means at command do not need to be dwelt upon. Every gynecologist up to date or who in his knowledge would be flush with the times will not be found in the back-ground or lying in ambush touching all these issues that have been stirring the professional mind and heart in these last years. They will find if they do not already know it that a powerful search-light has been turned upon all morbid efficiency, and that the stage of disputation concerning it is largely past. All these things have been better said elsewhere than I can say them here.

I desire to draw your attention further only to a few practical suggestions. I have known many cases of defeat by way of the ingesta. I have had patients who could not conceive or having conceived were sure to abort while using coffee—and I have recognized that coffee and ergot hold about the same paralyzing and defeating influences over the begetting powers. The same is largely true concerning other narcotics. No man or woman is endowed with full capabilities who is partially paralyzed, as is every one who is making a proving of any of the narcotics. Tea, coffee, tobacco, alcohol and the drugs used as condiments should be banished from daily use. Scan the regimen, the habitat, the exercises and mode of life. Everything depends upon physical excellence. Many a run-down woman has conceived as a result of the energizing influences of a sea-voyage.

Much attention has been shown in later times to mechanical intervention in the accomplishment of impregnation. Everything being in apparent accord still the result does not follow. Perhaps it is due to a persistent stenosis of os or cervix, to an incorrectible displacement, or to some other cervical obstacle. If only the spermatozoid could once gain entrance to the endometrium all would be well. It has been suggested that shortly after copulation the woman remaining quiescent, a delicate syringe be filled from the vaginal contents and carefully inserted beyond the os interum and a single drop evacuted within the uterus. The idea seems to be faultless and has been followed by more or less success. But I am convinced that it is uselessly cumbrous and unnecessary.

The ideal bacterium is the spermatozoid, and even one will serve. The anti-septic surgeon has accounted for many a fatal result on no greater provocation than the entrance of bacteria upon the edge of his knife-blade or through the eye of his needle.

So I have succeeded in effecting impregnation simply by the introduction of a Simpson's sound to the endometrium shortly after copulation—the point of the sound by its passage through the vaginal contents, having become sufficiently fertilized, if you please, to engraft the endometrium.

The time is not remote when the entrance of the peritoneal cavity was considered almost certainly fatal. The great fear attached to it put it beyond the pale of voluntary proceeding, and condemned many to hopeless conditions who could have been relieved. We are not yet fully possessed of the value of the exploratory incision, and are prone to delay its employment. Even now it is restricted generally to the linea alba or the parietes.

It was a long stride on the road to knowledge when the exploratory incision was extended to the vaginal roof. Entering through the Douglass space or between uterus and bladder, we are enabled to determine in most simple manner the exact condition of uterine body, ovaries and tubes. Many commencing degenerations can be thwarted, cystic vesicles punctured, diseased portions removed even to the division of an ovary, adhesions of fimbriæ broken up or dropsical tubes evacuated by tapping.

Going further, we may find and extirpate small fibroids, sub-peritoneal or intra-mural, that have before eluded our diagnosis and defeated our treatment. We can do all this short of ablation leaving the woman every whit whole and fully capable. The day is past when the gynecological surgeon, like the Indian warrior with his scalps, can boast of his prowess by the number of uteri, ovaries and tubes hanging to his belt. The chief honor will not be in their removal, but in their salvation while yet a part of their owner's body.

Materia Medica.

MATERIA MEDICA MELANGE.

By W. A. DEWEY, M. D., 170 W. 54th St., New York.
ex-prof. materia medica, hahnemann hospital college, san francisco.

Carbolic acid may be antidoted thoroughly and completely by *Cider vinegar* applied locally. Dr. E. Carleton reports this fact in the *Homeopathic Physician* for March.

Dulcamara is indicated in a dry coryza or a fluid coryza with obstructed nostrils; profuse discharge of water from eyes and nose, constant sneezing, worse during rest and in open air and better during motion and *in a closed room*, a symptom which is also found under *Colocynth* and *Hydrastis;* but both of these lack the relief from motion found under *Dulcamara.*

Cina is a drug abounding in *objective* symptoms; the red cheeks, the bluish white upper lip and linea nasalis, the picking of the nose, the crossness and the fact that the child has to be carried in order to sleep, speak louder than answers to questions.

Lachesis is a grand remedy in pneumonia where the disease seems arrested in its progress and remains stationary. The symptoms calling for *Lachesis* will then most likely appear.

Cuprum met. will often be indicated in pneumonia, where there is a sudden contraction of the chest, spasmodic oppression, cyanosis and danger of asphyxia, as shown by the cramps in the muscles of the chest. It will come in sometimes in pneumonias of those suffering from Albuminuria.

Nitric acid acts especially on the apex of left lung; *Sulphur* on the apex of right lung; *Natrum mur.* on the middle lobes; *Lycopodium* on the base of the lungs.

The presence of diarrhea in a case of pneumonia speaks loudly for either *Phosphorus* or *Sulphur.*

Guaiacum in tonsillitis.—Dr. Horace F. Ivins, in the *Journal of Ophthalmology, Otology and Laryngology* reports great success with *Guaiacum* in the early stage of tonsillitis before pus has formed; he uses the 2x dilution in drop doses. Also he finds it useful in acute and sub-acute pharyngeal catarrh; throat feels rough, burning, slight pain on swallowing, very little if any fever, but a dull, red, soggy look to the pharynx with enlarged vessels and scanty, perhaps stringy expectoration.

Apis and Ignatia have proved more satisfactory in the follicular form of tonsillitis than *Guaiacum. Guaiacum,* however, is an excellent remedy in chronic tonsillitis when the crypts are filled with cheesy masses. Ivins.

Kali phos.—Dr. Charles Deady reports this remedy as standing at the head of the list in suppuration of the ear, where it is exceedingly offensive.

Practice of Medicine.

THE NEW OPIUM ANTIDOTE—A CASE.

By H. BALLOU BRYSON, B. S. D., M. D., Pittsburgh, Pa.

Apropos of Dr. William Moor's announcement of his great discovery that *Permanganate of potassium* is the antidote for *Opium* and its alkaloids and in clinical verification of the truth of that announcement I wish to report a case:

On the evening of March 16, 1894, I was sitting in the office of Dr. Wm. D. King. It was seven o'clock and the doctor had not yet arrived for his evening hour. Into the office hurriedly came an excited and almost breathless man who asked for Dr. King. On telling the man that the doctor had not yet arrived he wanted to know where he could get a physician immediately to attend a case of poisoning. In the emergency I told the man that I thought I could accommodate him, and asked him what was the matter. "Come on; quick, doctor," he said, "my wife has taken *Laudanum.*"

My mind at once ran to *Permanganate of potassium*—Dr. Moor's announcement of its antidotal power in such cases being then but one month old, and the matter being very much impressed on my mind by the successful use of the antidote in two similar cases in our city during the preceding thirty-six hours—the first at the Homeopathic hospital, the second at the Allegheny general hospital. Accordingly, I asked the man when the *Laudanum* had been taken. He said: "Ten o'clock this morning." (The husband had been absent all day; and, on getting home at 7 p. m., found his wife in the condition detailed.) So, it being nine hours since the drug was taken, and, knowing that the poison had been largely absorbed into the circulation, and that what was not thus taken up had already been oxidized by the albuminoids in the stomach, I concluded that the hypodermatic exhibition of the antidote was the quicker and surer way to counteract the lethal effects of the *Laudanum.* Hence, into a vial I put some crystals of *Permanganate of potassium* ($K_2 Mn_2 O_8$), and filled it up with water—using enough of the crystals to make a saturated solution. Putting the hypodermic needle in my pocket I telephoned to Dr. King, told him of the case, that I was going to attend it for him until he could arrive, and asked him to come in at once. He also immediately thought of the newly discovered antidote, advised its use, and said he would be right in.

Going at once with the husband of the victim we soon arrived at what he feared would be the death-chamber. En route I learned that the wife, shortly after taking the drug, told a lady friend that she had taken nearly an ounce of *Laudanum,* and that she intended to "end the ills we have, and fly to those we know not of;" that this lady, having seen such cases before, had given the patient an emetic of mustard and water, and induced vomiting; that she had exercised the patient by trotting her around, and otherwise endeavoring to keep her aroused. Arriving, I found the patient, a lady of some 24 years, almost completely comatose; urgent efforts to arouse her elicited some disposition not to be disturbed, and a slightly successful effort to raise the eye-lids, but no comprehension of anything addressed to her; she had an anaemic appearance, and there was superficial coldness; the respiration, irregular and jerky, was, as near as I could make out, twelve per minute; the pulse, at times imperceptible, was thready and rapid. I lost no time in injecting subcutaneously, at about the usual seat of vaccination, on the left arm, about a half-cylinderful of the saturated solution of the *Permanganate.* I then awaited results, not inaugurating any of the usual methods of treatment.

In about fifteen minutes after making the injection Dr. King arrived. He at once noted the condition of patient, estimated the pulse rate at 120 per minute, the respiration twelve. When he made an effort to arouse her she opened her eyes somewhat better, and in response to his repeated commands made a faint effort to protrude the tongue. After the lapse of another fifteen-minute interval, during which she was left entirely undisturbed, an effort was made to arouse her; she immediately, brightly and widely opened her eyes, and at once exclaimed, "Where's Jack? Where's Jack?"—her husband. From that moment on she talked as clearly and rationally as she ever did, save in saying that she was sorry that she had not taken enough and that she would take enough the next time.

As to the case and its outcome, it is our joint opinion that the case was not one of the worst, not necessarily fatal in its issue, had the old method of treatment been resorted to; but under that method we would have had an all night's vigil, accompanied with much expenditure of physical energy. As it was, the result was truly magical; we felt perfectly safe in leaving the house in forty-five minutes after I had entered it; got better results by the new method in thirty minutes than we would have gotten by the old in as many hours.

However, there were some untoward after-effects. Visiting the patient the following morning we found the arm very much indurated and swollen, from the shoulder to the elbow; there was tenderness and redness, localized around the seat of injection, the tem-

perature was 100 degrees, with a corresponding pulse-rate. *Hepar sulph.* was prescribed.

Visiting the patient the second morning the swelling and induration were found to be aggravated, there was much dark discoloration, in places mottled, but there was less tenderness and no pain; temperature the same. *Hepar* was continued and dry heat applied.

On the third morning there was considerable abatement of all symptoms of abscess formation and the threatened condition went on to very rapid resolution.

I have though best to put this case on record as corroborative of Dr. Moor's wonderful discovery. It is, to my best knowledge, the fourth case of the kind on record; the first case in which the antidote was administered at any considerale length of time after the taking of the drug, and so teaches an entirely new lesson.

Of these first four cases it is remarkable that three of them should occur in Lincoln's "State of Allegheny;" that all four of them should occur inside of thirty-six hours; that in all four the results were such as to confirm the announcement of the discovery, and that of the four, two of them—the first treated by Drs. Gregg and Moreland of the Homeopathic Hospital here, and the fourth, the one here detailed—should fall to the younger school of practice. Homeopathic practitioners are not slow to adopt a good thing, irrespective of its source.

CHRONIC MUCOUS GASTRITIS WITH ULCERATION—THE STOMACH TUBE.

By A. E. THOMAS, M. D., Chicago.

On December 22d was called to see Mr. C——, who gave the following history: His father died at the age of 75 with some gastric disease. His brothers and sisters were more or less troubled with disturbances of digestion due to the stomach. Otherwise the family history was good. Mr. C——, 68 years of age, of good habits and, with the exception of trouble with his stomach, has always enjoyed good health. Fifteen years ago he was taken with sharp pain in the epigastric region just below the ensiform appendix. The pain usually occurred during cold weather, and was at first relieved by quinine. He was free from it during warm weather unless brought on by some irregularity in diet.

Seven years ago he had an attack resembling the present one only not as severe. The symptoms were much the same, though not as intense, and he was confined to his room for seven weeks. Since the above attack he has enjoyed good health during warm weather, with mild relapses of his old trouble during the winters. On December 10th was taken with the sharp, shooting pain in the epigastric region. There were some eructations; all kinds of food seemed to disagree; was very constipated, and had been for a few days.

On the 20th, something was taken to move the bowels that was very effectual. He began vomiting in the evening and suffered repeated attacks for three or four days. On the 22d he was found with these attacks of vomiting, usually accompanied with much pain. The pain would occur between one to two hours after eating and was relieved by vomiting. He would sometimes take lukewarm water to hasten the vomiting and relieve the pain and distress. The vomit was very sour and burned his mouth and lips.

His pulse was 88 and temperature 99 1-5. There was no tenderness upon pressure, but the manipulations of the examination would bring on paroxysms of pain. No tumor could be detected. The stomach was apparently of proper size and in its normal position.

During the preceding thirty-six hours no food had been taken, but some fluids collected in the stomach and the pains would seem relieved as before by the act of vomiting.

A diet of milk was prescribed to be taken in quantities of two-thirds of a cupful every three hours, three grs. of papoid to be put in each feed and the milk warmed. *Arsenicum album* 3x, internally, and a counter-irritant of *Chloroform* and *Alcohol* externally over the region of the pain was prescribed. On the 23d his condition was much the same. The warm, pre-digested milk would quiet the pain for a while after taking and the counter-irritant gave him some relief, but otherwise there was no apparent change. In the evening after I saw him he vomited blood, resembling coffee grounds in appearance.

Diagnosis of chronic mucous gastritis with hemorrhage erosin was made.

On the 26th a stomach tube was introduced one and one-half hours after eating, some of the gastric juice obtained and the stomach was washed out. The gastric fluid examined chemically showed an abundance of lactic acid and a slight deficiency of hydrochloric acid. In the washings of the stomach were found small shreds of mucous membrane.

The pains now were of a different character. He complained of more burning and gnawing and less of the sharp knife-like pains. The stomach tube brought up blood in a considerable quanaity on the evening of the 26th. His stools were the color and consistency of tar. The urine though normal in quality was increased in quantity. As lavage gave relief he was ordered to use the stomach tube as often as once in six hours if necessary to relieve the pain.

Dr. J. R. Kippax was called in consultation on the 27th. The tube was introduced and the stomach distended with air. It was found to be but slightly enlarged with the anterior wall smooth and somewhat thickened at the pyloric end. There was apparently no stenosis of the pylorus as the air passed readily into the intestine.

The diagnosis of chronic mucous gastritis with hemorrhagic erosion was confirmed and the consultant recommended *Urani nit.* in alternation with *Arsenicum alb.* Lavage of the stomach was continued.

Improvement was noted on the 29th and was uninterrupted; the patient making a complete recovery.

There were a few conditions that arose requiring a slight change in the remedies used. In four weeks from the beginning of the attack he was discharged as cured. He still keeps his stomach tube and feels as though he has a safeguard against another attack.

The milk and papoid was continued for some time after other foods were used. The papoid was prescribed not only as a digestive agent but also as a stimulant to the mucous membrane of the stomach.

This case illustrates something of the advantages gained by the use of the stomach tube as a means of diagnosis and treatment. The patient had suffered a similar attack seven years previous to this one which lasted seven weeks. This recent attack was much more severe being accompanied by more pain and vomiting and apparently more hemorrhage. He recovered his usual health in four weeks and has gained steadily in weight since.

By the aid of the stomach tube tests can be made

in all stages of digestion and the exact form of indigestion determined. The unadulterated secretions of the stomach can be tested and also the exact quantity remaining in the stomach at any given time. With it we can test the condition of the walls of the stomach, the patency of the pylorus and last, but not least, the exact size and position of the viscus.

A number of leading authors still cling to the old method of dilating the stomach for diagnosis by means of C O_2 but the tube is a much safer and more convenient way, and more reliable information can be obtained by its use.

MEDICAL CENTURY CLINIC.

The Pratt Hysterectomy.—We have been favored recently in the Medical Century with that which Dr. Pratt has considered an unfavorable criticism of his hysterectomy by one who follows the clamp method; and, again, we have been favored with another review of it by one who used the more insidious method of ligation. I say "more insidious" because there is, manifestly, less objection to the ligature than to the clamp, and, therefore, it is more liable to be retained by the profession.

Now are not both these operations in the same relation to the Pratt hysterectomy that ligation is to torsion? Everyone bold enough to rely upon torsion has been successful with it and serious accidents have not been met with. And in these days of aseptic and antiseptic treatments he must be commended who introduces neater, cleaner methods. Does not the report of seventy-five operations, with uniform success and no deaths, demonstrate the entire possibility and practicability of the Pratt method? Is there lurking fear that there has been a fatal case or two or three of secondary hemorrhage or septicaemia among them that has not reached the public ear? If not, why insist on any other method, which, to say the least, compasses a loss of time and tends to complication? If I were a surgeon and "knew a thing or two" I would submit the foregoing questions for the consideration of those competent to give answer.

E. D. Ayrs, M. D.

Little Rock, Ark.

Paracentisis—A Practical Hint.—In Paracentisis Abdominis, when the stream ceases or flaggs before much fluid has come away, use a linen catheter, one which snugly fits the canula, allowing the fluid to flow through it, and, as I experienced the other day, you will be gratified and surprised to see how simple you have been in using a grooved director or probe with which to push back the obstructing omentum in days gone by. Again, it furnishes a syphon, and you can dip down the inner end of the canula and thus get all the fluid, and even that which gravitates below the level of the distal end of the canula.

E. D. Ayrs, M. D.

Little Rock, Ark.

Mental Hebetude following La Grippe.—Phosphorus.—I have recently met with two cases of mental hebetude and somewhat of a general condition of physical prostration, both in young men who had recently suffered from moderate attacks of La Grippe, neuralgic and muscular in character rather than of the influenza form, and which the following chain of symptoms presented: Dullness of intellect; inability to do usual clerical work satisfactorily; occasional attacks of dizziness, especially when on the busy street or in a crowd; heaviness of head; dull pain in back of neck; disposed to be despondent and to feel depressed over the condition. General nourishment good, but, oh, so tired, all the time. In both cases *Phosphorus*, 12x trituration, was given with most excellent results, all the symptoms clearing up nicely in a few weeks, though they had been present many months.

I believe La Grippe to be largely a spinal neurosis, and, therefore, *Phosphorus* and allied remedies should do well by us in its treatment, especially in persistent symptoms of the character of those described.

C. E. Fisher, M. D.

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Accidental Hemorrhage in Labor.—Some two years ago I went to an obstetrical case at ten o'clock at night. The patient had a child two years before, delivered with the forceps. At this time she appeared in better health and strength and the pains came on stronger than at the commencement of her first delivery. This promising condition, however, was illusory. The pains became weaker and more infrequent. About the time appearances indicated a postponement of proceedings there would be a renewal of weak pains so I was detained at the house. About 3 o'clock A. M., being at the bedside, the patient complained of feeling weak and momentarily renewed the 'plaint *"I feel so weak,"* in tones distressing and alarming. Her face became pale and pinched; in short she was in "collapse." There could be but one cause—hemorrhage—which examination could not verify. But, diagnosis or no diagnosis, *China* was indicated and she promptly got it. During its preparation a plan of action was determined upon, which was to rupture the membrane, which, up to this time, had not occurred. This done the hemorrhage was apparent and abundant, but it was terminated by the stronger contractions of the uterus brought on as a sequence to the evacuation of the fluid and action of *China*. Notwithstanding the cessation of the hemorrhage it was concluded not to "tempt fate" in the case, and she was again delivered with forceps. Nothing of note again occurred in the case save that four days after the lochia became offensive. This was corrected by irrigation of the uterus with a weak solution of *Boracic acid*.

The characteristic of this accidental hemorrhage is that the flow ceases during pains, while "unavoidable hemorrhage," from placenta previa, are increased by the pains. True, there is nothing rare in all this, yet these cases are so rare that even good men may be, as I was, "rusty," and my only guide was a knowledge of general principles. In this case that knowledge proved to be of the right order, but I would have felt more at ease had I been fresh from the reading of the subject and as I would be in encountering the complication again.

Little Rock, Ark. E. D. Ayrs, M. D.

Pneumonia—The single remedy.—Dr. Whitaker's article in the Medical Century seems to have called out remonstrances from several quarters, and I feel like adding my mite. And first I will plead guilty to sometimes mixing remedies or alternating them, but it is always under protest and with the feeling that if I only knew my Materia Medica more thoroughly there would be no necessity for it. But it is sometimes impossible for me to get a satisfactory history of the case or enough subjective symptoms upon which to base a satisfactory diagnosis or prescription.

I would like to ask Dr. Whitaker if he has ever used the remedies, *Aconitum* and *Veratrum viride*,

separately and alone in pneumonia, and if so if he did not get better results in using the one remedy which was indicated, and if he did not get more prompt cures, and feel afterwards that he had learned more of therapeutics and gained more confidence in the Homeopathic Law of Cure thereby? It seems to me that we should strive to individualize our cases and get the similimum whenever possible, for in that way, by our greater success, we gain in our self-reliance and in reliance upon the indicated remedy and our Law of Cure.

It seems to me that *Veratrum viride* in its provings does not show the marked restlessness of *Aconitum* nor its great anxiety and fear of death; nor usually, if ever, has it so full and bounding a pulse, nor so dry a skin. Under *Veratrum* there is more perspiration, more nausea; in its perspiration it resembles *Belladonna*, as also in the class of patients calling for it—the full-blooded and pletheric.

Though I remember one case of pneumonia that I attended—a great big corpulent Irishman in the prime of life, weighing about 275 pounds—where from carelessly sitting up in bed without sufficient clothing over him he had taken a relapse, and I found him in a semi-stupor, reeking with a hot sweat, pulse 120, respiration 50, temperature 109, that *Aconitum* 3x in about one hour brought the temperature down to 104, pulse 100, respiration 32, and under other remedies as indicated he went right on to health and was out of doors in about a week, and in the month of December, too. He was so sick that the friends sent for the priest at the same time they sent for me, and none of us expected to see him live the night through. Now let us hear from others.

O. F. Hill, M. D.

Epworth, Iowa.

Associations.

CHICAGO ACADEMY OF MEDICINE.

CHRONIC GASTRITIS—SPECIALTIES IN MEDICINE—LA GRIPPE.

The Chicago Academy of Homeopathic Physicians and Surgeons met at the Grand Pacific Hotel Thursday evening, April 12, 1894, with a large attendance.

Prof. A. E. Thomas reported a case of chronic gastritis, with acute exacerbations; patient's age 63; fifteen years ago was confined to the bed seven weeks; second acute attack seven years ago, of long duration; last attack December 18, 1893: Sour eructations, pain, vomiting of blood, appearance of coffee grounds, temperature 99.5, pulse 88. The doctor laid great stress upon dilating the stomach by means of gas for diagnostic purposes. Treatment in this case *Arsenicum, Nitrate uranum,* papoid, diet of milk, and lavage of the stomach every six hours. Patient recovered in four weeks.

Discussion by Drs. C. E. Fisher, E. L. Smith, and Charles Gatchell. Dr. Fisher inquired as to the kind of tube used in lavage of the stomach, in regard to size and flexibility. Dr. Smith spoke of the advantages of inserting a stomach tube through the nostrils, as easier, and in sensitive patients the gagging and irritation caused by introducing it by the mouth were prevented. Dr. Gatchell laid stress upon the necessity of obtaining absolute rest of the stomach, depending on rectal alimentation for sustaining patients, and using calendula water for washing out the stomach. Dr. Thomas, in closing the discussion, reiterated the benefits that come from lavage, and also the great aid in diagnosing stomach derangements to be obtained from dilating the organ with gas, cautioning against the use of cold air in place of warm, as the former caused colicky pains.

Prof. Thomas' paper appears elsewhere in the Medical Century.

Prof. E. H. Pratt read a paper entitled "Specialties in Medicine." The article is so comprehensive, yet so closely connected, that it is impossible to do it justice in the few lines that would be granted to a report of this kind. With the rapid development of medical knowledge, the impossibility of one human mind to master it all, the interdependence of all knowledge, the absolute necessity of specialists for the purpose of arriving at any reasonable degree of perfection in the various branches, were clearly shown. Not only must one obtain a knowledge of the various branches, but experience is essential to the development of the finer powers of discrimination; that, for example, a practical working knowledge of auscultation and percussion is not obtained alone by reading, but by experience; that science must be supplemented by art. The latter is obtainable only by practice. Specialists are a positive necessity. The unbalancing, narrowing, and weakening propensities of specialties are self-evident.

The paper was discussed by Drs. Fisher, Gatchell, Foster and Lemuel C. Grosvenor. Dr. Grosvenor, an old friend of Agassiz, quoted from the latter gentleman to the effect that when the bent of the human mind was known it should be cultivated in that direction.

The essayist promised at some future time to answer the questions: How can we be specialists and still be doctors? How can we be doctors without being specialists? This paper will appear in the *Journal of Orificial Surgery.*

Prof. R. N. Foster gave a comprehensive lecture on "La Grippe." Its history is well known; found in all climates; more severe during cold than warm weather; symptoms uniform; more formidable and fatal than any other disease, Asiatic cholera not excepted; the effects long-continued; manifests itself usually in three forms: First, pure influenza; second, thoracic symptoms; third, digestive symptoms; predominating symptoms neurotic pains and prostration; peculiar distinguishing characteristic features are first, suddenness of the attack; second, violence; third, erratic course; fourth, neuralgia, are characteristic movements of the patient; temperature irregular, expectorations varied, recovery imperfect.

Treatment, special remedies, *Gelsemium, Eupatorium, Cimicifuga,* and old rye whiskey.

Discussion participated in by Drs. T. Griswold Comstock, St. Louis, Thompson, Palmer and Munson. Dr. Comstock's experience with La Grippe agrees with the statements made by the essayist in every particular, his experience with the disease in St. Louis being similar to that of Dr. Foster in Chicago.

Dr. Thompson reported two cases of La Grippe characterized by insomnia, each case terminating in death. He also agreed with the essayist, particularly with the statement that nearly all forms of disease at present are masked or modified by La Grippe.

Dr. Palmer believes that La Grippe is primarily an affection of the spinal cord, and stated that purple discolorations of the same had been found in autopsies; also cell changes. He reported two cases of sudden death, preceded by spots of purple discoloration on the skin soon after the attack.

Dr. Munson, after failing by the use of other means to obtain results satisfactory to himself, succeeded better by the use of the rectal plug.

Those who heard this able paper, as well as the large number of physicians who know of Prof. Foster's skill as a physician, will regret that the lecture was not written so that it could be published in full.

The next meeting of the Academy will be held in September, due notice of which will be given.

C. A. Weirick, M. D., Secretary.

HOMEOPATHIC MEDICAL SOCIETY OF INDIANAPOLIS.

MEETING OF APRIL 3.—SCROFULOSIS.

The society met at the office of Dr. Boyd, April 3, 1894, Dr. Runnells in the chair. By appointment of the president, Dr. C. E. Sawyer was made secretary pro. tem. Dr. W. B. Stewart read a paper entitled "Scrofulosis." It was a very exhaustive paper, showing much research, and was commended by all present.

Dr. Clarke opened the discussion. After a few very interesting remarks relative to the history of the term "Scrofulosis," Dr. Clarke affirmed that the bad results of scrofula were largely the result of relatives inter-marrying, especially cousins. He also cited several good authorities substantiating the ground that vaccination was frequently a producing cause. Dr. Boyd thinks there is an inherent predisposition to scrofula and that it is a retrograde metamorphosis, best treated by *Calcarea* and *Silica*.

Dr. George considers the term scrofula rather a meaningless one, and considers the condition arising from it the result of some vague syphilitic disorder.

Dr. Stewart advanced the opinion that scrofula and tuberculosis were very similar, but still sufficiently different to require special lines of treatment.

Dr. C. E. Sawyer gave it as his opinion that there was an inherent predisposition, which might, from lack of another term to express it, be denominated scrofula. He thinks, however, that many cases of hip and other joint diseases, which are called scrofulous, are not in any way dependent upon a particular dyscrasia, but that they arise from an injury, which, though apparently slight, would be sufficiently great to cause the breaking down of the same tissue in any individual, no matter what his predisposition; he believes also that this is true of cancer and tuberculosis, and that we have not yet the ability to locate the real condition in the system that produces these conditions.

Dr. O. S. Runnells thinks the term "Scrofulosis" perfectly useless, and thinks the results those of some sympathetic disturbance. In substantiation of which theory he reported some very interesting cases. He believes that the future affords greater possibilities for research and perfection in the causation of such conditions as scrofula, cancer, tuberculosis and many other such disorders, than has the past.

The discussion was then closed by Dr. W. B. Stewart, who considered very closely and carefully the various opinions given by the other members of the society. The program committee then appointed Dr. C. E. Sawyer to read a paper before the next society meeting, the subject of which to be, "American Nervousness." After which the society adjourned until the next regular meeting night.

C. E. Sawyer, M. D.,
Secretary pro tem.

MEETING OF APRIL 18.—AMERICAN NERVOUSNESS.

The society met Wednesday evening April 18, with the vice-president, Dr. W. B. Stewart in the chair. Minutes of previous meeting read and approved and the secretary of the society appointed as delegate to the Indiana Institute of Homeopathy which meets in May.

The chair appointed Dr. J. D. George to open the discussion on the paper for the evening. Dr. C. E. Sawyer then read a most able paper on "American Nervousness," which elicited the praise and approval of all present. Among the many good points in the paper were the following:

1. A notable fact that American people suffer more from nervous diseases than any other nation in the world.

2. The primary cause of this fact is the misuse of nervous force.

3. In studying the human being, necessary to study not only the physical but the spiritual or mental part.

4. Physical symptoms may be either direct or reflex. Among the former are climatic changes, dietary irregularities, perverse habits as regards sleep, exercise, hours for work and recuperation, together with lack of physical development.

We more than any other nationality of people subject ourselves to these unfavorable conditions.

5. Faulty habits not only cause a direct loss of nervous power but they originate a line of reflex drains far more disastrous in their results. Among the prominent reflex causes we find over-strained eyes, over-marked sphincters and overtaxed generative organs.

6. When we have learned to to know with a certainty the influence that controls, equalizes and perpetuates the baso-motor nerve stimulus we will have overcome retrograde metamorphosis, faulty assimilation and mal-nutrition with all their distressing results.

7. There are other sources of leakage from causes which are strictly mental, as worry, hyper-sympathy, mannerisms and demands of modern society.

8. No single line of treatment will cure all cases of neuresthema. Each case is a law unto itself.

The only lines of treatment that affords possibility of success are those so combined as to remove the various causes producing the disorder—hence must be both physical and mental.

Under physical measures we have: First—Drugs. Second—External or local manipulation. Third—Mental impression.

The drugs found most useful are *Aurum, Phosphorus, Nux vomica, Chamomilla* and *Ignatia.*

More necessary than drugs in some cases is the removal of unfavorable associations, sympathizing friends and sham emotions. Any doctor who allows his patient to subject himself or be subjected to causes that will perpetuate nervous strain, is doing an injustice to his clientele.

Dr. George thinks one great cause of nervousness is loss of sleep and the national tendency to climb mental mountains before coming to them. He emphasized the uselessness of worry and the necessity of learning to depend upon a Higher Power in all things.

Thwarting nature in various ways also a cause in

both sexes; one potent cause of nervousness in women being avoidance of child bearing. Close application to business to the exclusion of everything else also a prominent cause of this national disease. Time a most important factor in recovery from nervous troubles.

Dr. W. B. Clarke suggests that this "American Disease" as the English call it, is largely due to the increased mental effort necessary in all lines of business, much more knowledge being required now than formerly for men to obtain a standing in the same lines of work.

The abuse of tea, coffee and tobacco results in shattered nerves, while the inordinate use of quinine or whisky and quinine also brings about results no less detrimental.

The continual noises of street cars, factory whistles, switch engines, etc., also a causative factor.

The unwise, sentimental expression of sympathy detrimental to a nervous patient. Sympathy should be a question of head—not of heart—for the best good of the patient. In the treatment of Neurasthenics, *Aurumo* for loss of money stands contrasted with *Arsenicum* for loss of friends. *Picric acid* 2 x or 3 x, as advised by Kraft, he has found useful.

Dr. F. E. Stewart thinks the terms neurasthenia and hysteria vague ones, conveying little or no idea of pathological conditions, which must exist, although today such diseases are considered merely functional.

He considers the usual manner of eating one great cause. Few spend proper time at their meals. Thinks it unwise for a physician ever to take a meal with a patient as thereby he usually spoils all his previous advice by eating more food in less time than his patient ever did.

Dr. J. T. Boyd thinks that the existence of a disease called neurasthenia is not to be doubted by any one and the causes are both mental and physical, among which he mentioned mal-nutrition and vicious habits of all kinds, especially excessive venery.

He also laid much stress upon repressed love or thwarted affections as causative factors in many cases and mental treatment of the utmost importance in these cases. He added *Camphor bromide* to the list of useful remedies.

Dr. W. R. Stewart emphasized the danger to the nervous system from improper quality and quantity of food at unseasonable hours. As a nation we use too great a variety of food at the same meal.

Early and excessive school work with night study and consequent loss of sleep undoubtedly injurious to the nervous system.

Dr. R. W. Rogers thinks the present educational system with its cramming and crowding of school work and accomplishments, especially during first years of puberty a most potent cause of neurasthenia among young girls. Also loss of sleep incident to social demands a prominent causative factor.

In the treatment of these cases there must be a relation of perfect confidence established between physician and patient if the mental causes are detected and overcome. The therapeutic uses of *rest* and the difficulty of teaching nervous patients how to really relax and rest, was commented upon.

Dr. W. B. Stewart coincided with the views of the paper, which he designated as "all meat." He believes some people are born to be nervous—that is, are of a nervous temperament from birth. Climate and atmospheric conditions have much to do with developing this temperament. Unquestionably a great cause back of all, and the vast expenditure of will power and nervous energy used by our ancestors in settling this country doubtless has left its impress on the nervous systems of their descendants. "Survival of the Fittest" the basis of our republic.

Dr. Sawyer in his concluding remarks gave a number of interesting cases, among which was one of educated fesendo locomotor ataxia, where mental treatment was the greatest thing needed. He believes these are neurasthenics from choice, which he calls "Sanitarium Fiends," owing to their fondness for that kind of life. He suggests the necessity of guarding against allowing the patient to indicate the line of treatment instead of the physician laying down the law.

Rebecca W. Rogers, M. D., Secretary.

MISSOURI INSTITUTE OF HOMEOPATHY

ST. LOUIS MEETING, 1894.

TUESDAY—MORNING SESSION.

The eighteenth annual session opened auspiciously April 17th, at St. Louis, with between fifty and seventy-five physicians in attendance, many from a distance, at the Lindell Hotel.

Drs. Howard Crutcher and H. W. Pierson, of Chicago, and Dr. Frank Kraft, of the *American Homœopathist*, were among those in attendance at the opening.

The St. Louis Homeopathic Society, with Dr. W. B. Morgan at its head, have made many visible improvements in the Society, as evidenced by the perfecting of committees for anticipating almost every want of the Institute.

The president of the Institute, Dr. William P. Cutler, of Kansas City, is thoroughly up in parliamentary practice, his decisions being delivered in a clear voice and very manifestly fair and judicious, as was evident in one of the threatened passages at arms between the ins and outs of the Kansas City Homeopathic Medical College. The meeting has been well advertised through the unremitting diligence of the general secretary, Henry J. Ravold, of St. Joseph. The press has never before been so well taken care of by the committee. In short, the detail has been well looked forward to, and no convenience or comfort omitted.

Shortly after the hour appointed for the opening, President Cutler called to order and introduced Rev. Mr. Parsons, who led in prayer.

In his address of welcome, which, by the bye, was a masterly bit of English, effective, beautiful and convincing, Dr. Morgan compared the difference between emotional and pragmatical criticism. He said that no two people view exactly the same object; and certainly do not esteem the object in like degree. Carlyle once in travelling through Scotland near the old homestead queried of an old farmer if he knew the Carlyles. Yes he knew them all. One of the boys took to law; another one, Thomas, went to writing for the newspapers he believed; but Jamie was the lad, as he did raise some of the finest hogs that went into the Dumfries market. Music which entrances the cultured soul falls passionless on the untrained ear. The Allopathic physician doubtlessly will regard us as long-haired if not long-eared individuals, off at a tangent and ignorant of the true principles of medicine. The trades-union folks will

look upon us as perfecting a medical trust. And if any of the servants of the hotel have had to suffer from some one of our number, he will regard us as a band of torturers. The practical detail of the doctor's life was sufficient to sour him against human kind: but of these there were none members of this Institute. We do not hate our rivals; for we are willing to leave our patients to their tender mercy while we attend these sessions. Medical men are not philanthropists in the sense that millionaires are lauded when they found a charity; but they are practical, every-day philanthropists. They are not heroes because they do not publicly save a humble life, and yet every doctor who has been in public for a few years has saved more human lives than there are members present at this meeting. The physician's life is one of grand disinterestedness. We have risen, through our peculiar tenets, into an appreciation of the finer adjustments of the human organism; we become broad and liberal.

Dr. Cutler, as president, responded to the welcome in equally fitting terms and was many times interrupted by generous applause. He had several apropos stories which kept the audience in good humor and very perceptibly lessened the gloom cast on it by the threatened fight over the Kansas City College.

When the routine work was entered upon Dr. Morgan reported the treasurer's accounts as in fine shape with $45.70 over and above all accounts.

On report of public institutions Dr. Grundman reported the Good Samaritan Hospital, stating that during the year 218 patients were treated, of whom 141 were cured and 17 died; the others varying in not cured and improved. There are 85 beds and the report was well received as indicative of great and material improvement in Homeopathic appreciation.

Dr. Cummins reported equally favorably for the Children's Hospital, there being usually between 40 and 60 children under treatment.

Dr. Richardson reported the great success experienced by the dispensary of the Homeopathic Medical College of Missouri (St. Louis), which had, during the past year, treated over 5,000 patients. Clinical material was in such abundance that none but very rare and difficult operations elicited any marked enthusiasm from the classes of the college.

Dr. Morgan stated that for three years past he had been giving a surgical clinic at the City Hospital (Allopathic), with equal rights and facilities as extended to the Allopaths. Indeed, he had been asked by the superintendent of the hospital (an Allopath), to lecture to the attendants on the Homeopathic system of medicine, which he had done. Homeopathy had received practical recognition on all sides and he was proud to make his report. Prof. McElwee also had a weekly medical clinic at the hospital.

Dr. Foster reported for the Kansas City Homeopathic Medical College.

At this point an attempt was made to read a report signed by nine members of the Institute in relation to the college trouble at Kansas City. Dr. Brady offered to read the paper, but vigorous objections were interposed and in such excellently studied parliamentary form, that the president was obliged to take cognizance of the same and ordered that the paper be referred to a committee of three who upon due investigation shall report their finding to the Institute.

President Cutler in his annual address stated among other things pertinent and interesting that he regretted that that part of his predecessor's annual address which gave the locations for Homeopaths in Missouri was not published to send to every important college of the land. There had been no society with which he was or ever had been connected which gave him as complete satisfaction as this Missouri Institute. He paid a forcible compliment to those physicians who attend these sessions by stating that they are invariably of that class who are the most thought of at home, brainy and energetic. According to the American Institute of Homeopathy this society now ranked as fifth in number of members, the New York State Society being the first, followed closely by Illinois, Pennsylvania and Massachusetts. The more important organizations of the East meet more often than once annually. This Institute reports two hundred and sixty members but in reality only ninety-seven are paying members. If the full quota attended and paid its dues what a fund might be had to fight unjust legislation and in other ways advance the interest of the school. He suggested the dropping from the rolls of those who had failed to pay and attend. He referred to the many state institutions which ought to be under Homeopathic treatment. The state board of health has at last added a Homeopath to its number. From this he drew the lesson that persistence would bring many other of our state institutions to our school. He recommended the appointment of a committee of three and the present Homeopathic member of the board of health be one of such committee with power to act, and also placing sufficient funds at their disposal to cover actual travelling expenses if nothing more. He counseled the present as the time to act. The terms of the several asylum boards expire February, 1895, and the term of the lay member at St. Joseph Asylum expires February, 1896. These should be the times for our school to act; if we do not act now we must wait another four years. In concluding he recommended that the general secretary be instructed to correspond with all former members, urging them to wake up.

The monument to Hahnemann was eloquently championed and a committee recommended to be appointed to take the matter into consideration.

Our crowded page will not permit the giving of this address in full; it was a masterly effort, was replete with valuable suggestion, and was received with marked interest. At its conclusion many remarks commendatory were made.

Dr. Lizzie G. Gutherz, the charming vice-president of the Institute, presided during the delivery of this address and at its conclusion paid a glowing tribute to the address and President Cutler.

At this point the effort was made to introduce the Kansas City College war, but skillful and apropos decisions on the part of the president kept the threatened paper out of the public eye, and referred to a committee.

Drs. Scott B. Parsons, Jr., and C. H. McDowell were proposed and elected to membership.

BUREAU OF CLINICAL MEDICINE.

On motion, it was resolved that the papers sent in by members of this Institute but who are not themselves present should be read only by title. The Bureau of Clinical Medicine was then opened, with Dr. Westover chairman.

Dr. Kershaw was the first essayist, his paper entitled "A Case of Basilar Meningitis." It concerned a boy who had measles a few weeks before the professional call, but had no ear disease. Father of the boy has had a winter cough for seven years, is stoop shouldered, and gives every appearance of consump-

tion; mother and sisters ill nourished. During the essayist's absence from the city Allopathic physicians were called in who deemed the case hopeless. Dr. Kershaw was then recalled, prescribed the usual Homeopathic remedies, also some auxiliary measures, and succeeded in dropping the temperature from 106 to 102. This boy, notwithstanding the fact that he had a usually considered fatal case, recovered under Homeopathic treatment, and is well today, without blemish in mind or body. Dr. Kershaw made a very eloquent appeal for less hypercriticism of one school of medicine towards the other.

Dr. Cummins corroborated the diagnosis of the paper just read, and called attention to the difficulty of distinguishing rheumatism, when it has gone to the brain, from basilar meningitis.

Dr. F. D. Canfield presented "Spinal Irritation," which was discussed by Dr. McIntyre. "Articular Arthritis" was read by Dr. Cummins, and this was followed by Dr. H. C. Baker in a paper entitled "My Experience with Trismus." Dr. Hudson, in discussing the last named paper, said that he had been called to the case, and had given an unfavorable prognosis. After this lady had recovered under the treatment of Dr. Baker, she visited Dr. Hudson in order to convince him of his mistake.

The next paper was "A Blister in the Right Place," by Dr. T. H. Hudson, and was a markedly original and humorous production. It dealt with the early experience of the essayist while he was yet an Allopath. The paper was well received and created much amusement, while at the same time drawing the valuable lesson of the improvements of the later practice.

Dr. S. C. Delap presented his views on *Nitrate of Silver* in Albuminuria. He instanced the case of a severe case of albuminuria which he had treated in the manner indicated and with absolute satisfaction. Dr. Edmonds, in discussing this paper, made many pleasant references to his earlier practice when he yet abided in the territory of the Allopath. He referred to the fact that in the Southern countries, and especially in Kentucky in the olden time, *Nitrate of Silver* was very much used by the old school, both internally and externally. This was especially true with the epidemics of typhoid fever, which used to sweep over these states.

"Eczema, Clinical Cases," was presented by Dr. Galloway, and the paper, which was well prepared, and equally well delivered, drew much discussion upon its merits, Dr. McIntyre contending that eczema is not easily treated, usually requiring long periods of time; said there is no such thing as blood disease; in his opinion eczema is a disease of the trophic centers, as is evidenced by the hair, by the dry and brittle nails, and by the unusual color and consistency of the skin. Dr. Canfield was glad to speak a word for *Graphites* as a remedy for eczema, especially when it had the honey-like discharge. For local application he used the bi-borate of glycerine.

Dr. Burgher presented a paper on "Clinical Medicine," which was a clever take-off on the usual report of cases found in many of the medical journals. His points were well taken, and while creating much merriment did not fail of inculcating the lesson of greater exactness in reporting of cases for the instruction of medical readers.

Dr. Edmonds read "Therapeutic Administration," in which he referred to many practices formally employed by Homeopaths in the giving of their medicines, and especially in reference to their inhalation. He also made a plea for greater discrimination as to the time and the manner of giving the dose. He believed that the tongue and the stomach should be prepared to receive the medicine. He exhibited an inhaler of his own device which possessed the positive merits of being simple, inexpensive and efficacious. It consisted of a glass tube, a small sponge saturated with the inhalent thrust into the tube, and both ends of the tube securely caught. By removing a cork the apparatus was in completion for use. Dr. Edmonds' paper contributed much to the information of the Institute and was closely listened to.

Dr. Neumeister presented a paper on "Rupture of the Uterus at Fourth Month of Pregnancy" which was of so unique a nature that it was freely discussed by many members of the Institute. Among the participants being Dr. Canfield, who plead for Homeopathic remedies, and Drs. Comstock and Richardson, who reviewed the case from an almost wholly surgical point of view. Dr. Schott came to the defense of remedial measures and clearly outlined the scope of remedies. He said that no Homeopath could expect to take the place of surgery in cases of this kind.

The last paper of the afternoon session was "Circumcision as a Therapeutic Measure," which elicited many opinions pro and con as to the operation. This closed the bureau.

On motion of Dr. Richardson it was resolved to hold night session beginning at 8 o'clock. The auditing committee reported through Dr. Shay, while the censors presented the names of L. L. Schussler and T. F. Blankey for membership, who were promptly elected.

The committee on credentials reported as present, Prof. Howard Crutcher, M. D., of the Hering College of Chicago and recommended that he be requested to address the Institute for a few moments on the value of Homeopathic teaching in that city by the lake. Dr. Crutcher responded by relating the success attending the missionary labors of the Dunham Society of that city composed not wholly of Homeopaths but of medical men and women desirous of learning the best and the quickest way of curing patients.

At this point a recess was taken till 8 o'clock.

TUESDAY—EVENING SESSION.

BUREAU OF MATERIA MEDICA.

The evening session of the Missouri Institute of Homeopathy on Tuesday was opened by Dr. Howard Crutcher who took charge of the bureau of Materia Medica. The first paper read was by Dr. Burgher, entitled "Alcohol." This resulted in a spirited discussion, participated in by a majority of those present.

Dr. McElwee discussed "*Calcarea phos.* and its near Relations," in which he gave a very excellent picture of its concomitants. The discussion by Drs. Pierson and Hudson, who further reviewed the remedy and brought out its strong points.

Dr. McIntyre discussed the "Therapeutics of Nervous Diseases."

"That Tired Feeling" was a humorous production by Dr. Frank Kraft of Cleveland, whose main object seemed to be in presenting a series of remedies employed by Homeopathic physicians, which remedies had this feeling in a pronounced way. Dr. Kraft was anxious to impress upon his hearers the better way of studying Materia Medica, so that instead of memorizing innumerable symptoms he advocated the drawing of mental pictures, for each remedy. The paper was written in a bright style, attracted considerable attention and was received with much favor. In the discussion ensuing, Drs. Crutcher, Pierson, Hudson and others took part, all

complimenting the essayist upon his manifest improvement in the manner of acquiring Materia Medica.

Dr. M. H. Badger was elected to membership, and the Institute adjourned until morning.

WEDNESDAY—MORNING SESSION.

When the Institute was called to order it was found that a number of Chicago physicians had arrived during the night to participate in the institute labors. Among these were Prof. E. H. Pratt, famous for his discoveries in Orificial Philosophy; Prof Sheldon Leavitt; Dr. C. E. Fisher, editor of the MEDICAL CENTURY; Prof. Geo. F. Shears and Dr. F. D. Holbrook. Prof. C. E. Walton of Pulte College, Cincinnati, and Dr. O. S. Runnels of Indianapolis were also present. Prof W. A. Dunn of Chicago and Dr. W. E. Green, Little Rock, also noted. These gentlemen were accorded the courtesies of the convention and several of them elected to honorary membership.

Major Griffin of the Missouri Pacific railway addressed the Institute in relation to railway transportation to Denver in the coming June. Dr. C. E. Fisher, as chairman of railway transportation of the American Institute of Homeopathy, being invited, addressed the institute in behalf of the official route from Chicago to St. Louis, the Chicago & Alton and Union Pacific railways.

The bureau of Materia Medica was resumed and Dr. Crutcher presented Our Surgical Remedies, in which he took the ground that conservative surgery is the more desirable way of the day. He did not wish it understood that there was to be no operating, but he clearly impressed his audience with the necessity of being sure that remedies would prove inoperative.

BUREAU OF GYNECOLOGY.

The Bureau of Gynecology was then called, with Dr. Moses T. Runnels, chairman. Before proceeding upon the business of the bureau, Drs. Howard Lindey and Robert Carr Block were elected to membership.

Dr. Merrill, the Eclectic member of the Missouri state board of health, was presented to the Institute and accorded the privileges of the floor. Dr. Crutcher presented the following resolution: Resolved, That the thanks of the Missouri Institute of Homeopathy be tendered to Gov. Stone for the appointment of our fellow member, Dr. Thomas H. Hudson, of Kansas City, as a member of the Missouri state board of health.

Dr. Sheldon Leavitt read a most interesting paper, "Shall the Uterus be Removed with Diseased Appendages?" In which he contended that it was bad practice to remove the uterus when it was healthy even if the appendages were manifestly diseased.

Drs. Green, Fisher, Richardson and O. S. Runnells participated in a discussion, very much after the line of thought recommended and practiced by Dr. Pratt. Dr. Pratt contended that if the appendages being diseased had been removed the uterus would naturally atrophy, cause reflex nervous disturbances, and make life a burden to the woman. Dr. Shears sided with the essayist in that it was a doubtful measure to remove a healthy organ.

ELECTION OF OFFICERS.

At 12 o'clock under a special order of business, the following officers were elected: President, W. B. Morgan, St. Louis; L. C. McElwee, first vice-president; G. A. Russell, second vice-president; H. J. Ravold, general secretary; E. F. Brady, provisional secretary, and M. T. Runnells, treasurer. The following board of censors was elected: J. T. Thatcher, Oregon; L. G. Van Scoyoc, Kansas City; W. John Harris, St. Louis; Lizzie Gray Gutherz, St. Louis, and C. J. Burgher, Boonville. It was agreed to meet next year at Kansas City.

Dr. Leavitt in closing the discussion on his paper reiterated the statements contained in his essay and answered his seritim.

WEDNESDAY—AFTERNOON SESSION.

The Bureau of Gynecology was resumed and a paper by Dr. W. A. Forster of Kansas City entitled "The Treatment of Retroversion and Retroflexion of the Uterus," which was eloquently presented and discussed by Drs. Green, Shears, Holmes and O. S. Runnels.

Dr. Richardson was opposed to any other instrument in the replacing of this organ than the finger. He did not believe it advisable to remove the uterus to cure retroflexion and retroversion. He advocated the shortening of the ligaments.

Dr. Forster said that he was very much pleased with the criticisms passed upon his paper, but feared that Dr. Richardson's finger would not be a sufficient instrument in many cases. He described the wool tampon, how to make it and how to apply it.

"Sterility" was then presented by Dr. O. S. Runnels, which proved to be a scholarly paper. Dr. Runnels reviewed at length the different causes of this trouble, in the major part of which causes he was supported, though sometimes criticised, by Drs. Walton, Fisher, Crutcher, Shears, Pierson and Hudson. The discussion took a very wide range and was protracted to a late hour. See paper elsewhere.

Dr. Pratt was then invited to present to the Institute some specimens of morbid anatomy removed by him from a number of patients and to describe the mode of procedure. This Dr. Pratt did, occupying the floor for nearly an hour, holding his audience closely and with deep interest.

Drs. Runnels, Green and Parsons in discussing the operations and the specimens brought out the essential points in the matter. Dr. Leavitt, however, did not agree with Dr. Pratt, and in his speech was several times interrupted by Dr. Pratt, which caused a considerable and animated dialogue between these parties.

Dr. Kershaw presented a paper entitled "Some Unnecessary Gynecological Operations," which was very apropos conclusion to the heated discussion which had just preceded its reading. Dr. Kershaw reviewed a number of operations which are made by young surgeons who frequently engage in operations unfortunately more to gain a reputation for work than to cure patients.

Drs. McIntyer and Holmes in their discussion of the paper also deprecated the multiplicity of operations done and the temptation to do others. They counseled greater moderation and more attention to conservative surgery.

Dr. W. A. Dunn of Chicago, spoke of the importance of diagnosis in all diseases as well as operations. A correct diagnosis is of the most vital importance.

The last paper of this bureau was of "Recent Progress in Gynecology," by its chairman, Moses T. Runnels. This paper was an excellent resume, as its title implies, of the entire field of woman diseases. The paper was exhaustive in its depth and breadth, reviewing at length whatever improvement had been made in the field in the immediate past and compar-

ing them with the improvements now in contemplation by the most advanced of specialists in this field. Dr. Runnels advocated, as has been several times done during this bureau, the policy of conservatism in gynecological work.

Dr. Pratt, among other things, in speaking of the paper said that shock as a factor in the surgical treatment of cases must not deter the operator from proceeding at times with apparently hopeless cases. He said that a man with a splinter in his finger will be relieved of his pain as soon as the foreign object is withdrawn. If a man perfectly healthy meet with an accident requiring a surgical operation, the resultant shock from the operation of amputating a limb will not be so great as in the case of a person whose body had been diseased for years if this person should require to undergo a similar operation. Indeed this latter party may die under the operation whereas in the former although seemingly in the throes of death before and during the operation it is astonishing how rapidly they recover afterwards.

Drs. Lawrence Enos and S. T. Kelley were elected to membership.

WEDNESDAY—EVENING SESSION.

The Obstetrical Bureau was opened under the chairmanship of Dr. Wm. C. Richardson, who introduced Dr. Edmonds as the first essayist. The paper, "Ergot," was a very attractive one, and consumed in the reading and discussion, the major part of the evening. The Homeopathic profession, not unlike the old school, is very much divided on the use of this drug. Dr. Grundman presented a paper on "Maternal Impressions," embellished with a series of photographs, taken from life, of a child severely marked about the head.

Dr. Morgan believed that at certain times in gestation, every prospective mother is apprehensive that her child will be marked.

The paper of Dr. Martin, on "Hydrocephalus," was read by title.

Dr. McElwee read "Occipito-posterior Position," which was discussed by Drs. Leavitt, Shears, Richardson and Edmonds.

A paper by Dr. Cartlich was presented, but not read, owing to his absence.

Dr. Cummins read a paper on "Diet in Pregnancy."

Following this was a practical paper entitled "Practical Points in Obstetrics," which was presented by Vice President Gutherz.

"Puerperal Metritis," by Dr. Neumeister, was given, and was then followed by the last paper of the Bureau, "Obstetric Surgery," by Dr. Richardson. This paper was wonderfully complete in all its details and was well received. The Board of Censors recommended the election of Dr. J. D. Davis and Dr. Theodore H. Winans.

THURSDAY—MORNING SESSION.

On opening the session the bureau of surgery was called and temporarily presided over by Dr. Foster, the first paper read being by Dr. Green on "Arthrotomy in Old Dislocation of the Shoulder Joint, Clinical," which was discussed by Drs. Shears, Foster and Parsons.

"Herniae Cerebri," was a very interesting paper by Dr. Kershaw, being a case of disease rarely ever attended by success. He was very highly complimented upon his skillful treatment by a number of the members present.

REPORT OF COMMITTEE ON PRESIDENT'S ADDRESS.

Your commmittee on president's address have had the same under consideration and beg leave to report as follows:

As a whole we commend the address as being an aggressive, loyal Homeopathic document.

Arrears.—In the matter of members who are in arrears for dues, we desire to remind the society that the rules adopted at a previous session provide for the dropping of members who are in arrears for more than three (3) years' dues, provided however that they shall first be notified of their arrears by the treasurer and asked to pay up. We endorse the recommendation of the president in this and respectfully submit that the treasurer shall be required to perform the duties prescribed in this rule.

Meetings.—In the matter of holding meetings of this society oftener than once a year, we feel that such meetings would be in the interest of the Homeopathic school, but we are not prepared at this time to recommend that there be other than the regular annual meetings, which are well attended and of great interest. Our reason for this is that we fear that holding of meetings oftener than once a year would cause a smaller attendance and divided interest.

Monument.—In the matter of the Hahnemann monument fund, to which the president calls attention, we recommend that the Missouri Institute shall donate $10.00 and appoint a committee of three whose duty it shall be to solicit subscriptions for the fund.

State Institutions.—In the matter of Homeopathic representation in state institutions we feel that the president in calling attention to the subject has performed a duty to the public at large as well as to the Homeopathic profession, and we recommend that the society appoint a committee of five members, whose duty it shall be to have this matter of Homeopathic representation in state institutions in charge. Said committee shall be composed of the Homeopathic member of the state board of health, who shall be ex-officio chairman of the committee; of the president and secretary of this Institute and two members of the Institute to be appointed by the president. It shall be the duty of this committee to make every effort to secure to the Homeopathic profession and taxpayers a just and fair representation in all public institutions of the state and to see to it that no discrimination is made among physicians because of their school of practice and that there shall be a just and fair distribution of patronage based on professional merit. We are entitled to and should demand as a right the exclusive control of at least one of the state institutions for the insane.

We further recommend that this committee be instructed to meet sometime before the adjournment of this session and that they elect a secretary who lives in the same town with the chairman of this committee at whose office shall be established the headquarters of this committee. The chairman and secretary are also hereby instructed to open correspondence after consultation with the other members of the committee with the chief executive of this state and all influential persons whom they can reach, asking of them their co-operation in the matter, which is desired to be accomplished.

We further recommend that this committe be and is hereby authorized under the signatures of the chairman and secretary, together with that of the president of the Institute, to draw from the treasurer

of this Institute such monies as are necessary to carry out this work, provided the amount shall not exceed what may be left in the treasury after the payment of the expenses of the session.

We further recommend that a copy of the president's able address and these resolutions be furnished to all the Homeopathic journals for publication.

Wm. C. Richardson,
Wm. D. Foster,
G. A. Russell,
Committee.

On reassembling of the Institute, Dr. W. D. Foster presented the following resolutions:

Resolved, That the thanks of the Missouri Institute of Homeopathy are hereby tendered the Lindell Hotel for excellent service and favors extended.

To the daily press of St. Louis for full and accurate reports.

To our retiring president, Dr. William P. Cutler, for the careful, equitable, and always courteous manner in which he has presided over our deliberations.

To Dr. Frank Kraft, now of Cleveland, Ohio, but formerly a resident of our city, for his faithful shorthand reports.

To the general secretary, Dr. Henry J. Ravold, for his efficient labors of the past year.

To all the remaining officers of the Society, as well as to the corps of St. Louis physicians whose labors have proved so successful in providing for our reception, and have made it possible for this eighteenth annual session to be, in truth, a banner occasion.

SURGICAL BUREAU.—CONTINUED.

Dr. Wm. D. Foster read a paper on "Varicocele with its Surgical Treatment."

This was followed by Dr. Parsons, with an elaborate and well-digested paper on an exceedingly rare disease, "Myxo-Sarcomata."

Two other papers were presented, one on the "Treatment of Cancer," by Dr. Howard Crutcher, and the other on "The Relation of Disease to Crime," by Dr. W. J. Harris. Dr. Harris who has been critically ill since the opening of this Institute appeared in the session just as his paper was called and asked that it be not read except by title. The bureau was closed by the presentation of "The Scope of Mechanical Treatment," by the chairman, Dr. Morgan.

The committee to whom had been referred the charges promulgated against the Kansas City Homeopathic College reported that in pursuance of their efforts made in the interests of peace and harmony all charges preferred against the college and against Dr. Delap had been withdrawn and every effort was being made to cause amicability on all sides. The committee further reported dropping from the rolls the name of a member who had persisted, despite of warning, in unprofessional conduct. The report of the committee was then adopted as a whole. Drs. Conrad, Dittlinger and Eaton were elected to membership.

On motion of Dr. Burgher the Institute ordered the creation of a Bureau of Neurology.

Dr. McElwee was placed in charge of the Bureau of Pedology in place of the absent chairman, and read a number of papers by title; it being discovered that many of the members attached to this bureau were in the building but not in the hall it was agreed to give way to the Bureau of Chemistry, Toxicology, etc., with Dr. G. A. Russell as chairman. The chairman's own paper was then read, on "A Few Words about Poisons," which proved to be an able handling of a difficult and interesting subject. It was discussed by Drs. McElwee and McIntyer, the former of whom counseled the having at all times prepared a poison antidote case, and although this might be used but infrequently still when it was required it would many times over pay its expense. The latter repeated the story of a patient who had presented all the symptoms of arsenical poisoning after having a tooth treated preparatory to filling.

Dr. Canfield recommended the aids of the microscope in diagnosis making a good case in difficult and mixed up conditions. Dr. Westover's paper on "Microscopical Examinations of the Blood" was passed by his own request.

BUREAU OF SANITARY SCIENCE.

Dr. Van Scoyoc then introduced Dr. Delap, who opened the Bureau of Sanitary Science with "Oxygen Starvation." The title very nearly conveys the value and the subject of the paper. Dr. Delap is a versatile writer and is always entertaining and instructive.

Dr. L. C. Grosvenor was asked to address the Institute on "Our Girls," which he did in his famous fashion, reviewing the girl's life from a tender period until she enters upon the sacred function of motherhood. The remarks were well received and debated at some length by Drs. McIntyer, Dryden, McElwee and Morgan.

BUREAU OF OPTHALMOLOGY.

Dr. Delap read at this point, under the Bureau of O. and O., his own paper on "Retinitis albuminrica." "Adenoid Tumors of the Naso Pharynx" was read by Dr. Robert Carr Block.

BUREAU OF PEDOLOGY.

Dr. Gutherz was placed in charge of the Bureau on Pedology and called on Dr. Foulon for his paper —"Tetanus neonatorum." This proved to be an interesting subject and elicited the information that this condition was due in great part to the bad treatment of the umbilical cord. In this he was supported by a number of the audience with clinical cases, especially that produced by Dr. Kershaw. The chairman's own paper on "Homeopathic Babies" was well read and equally well received.

EDUCATION AND LEGISLATION.

The Bureau of Education and Legislation was presided over by Dr. Hudson, and Dr. Westover read the first paper, on "The World, the Flesh and the Devil." In his paper the author divides his topics into three sections and uses each section for the purpose of inculcating some lesson to the medical profession; he handled the code ideas with no tender hand, likewise the genteel advertisers and the hypocrites in the profession. He read a lesson to the journals for advertising notorious nostrums. The state board examination inquisitions he dealt many an unmerciful blow. It was a fine paper. Dr. Delap followed somewhat in a similar vein in discussing State Boards of Health, contending that the duties of the board of health is to attend to the health of the community and not to regulate the practice of medicine. Dr. Ravold treated of his pet subject, "Compulsory Cremation," in his usual way and very effectively.

Delegates to other societies were then appointed as follows:

Dr. Kraft to the Ohio society.

Dr. Dunn to the Illinois society.

Drs. Richardson, Comstock, Morgan, Foster, Hudson, M. T. Runnels and Westover to the American Institute of Homeopathy.

Dr. Monroe to Kentucky.
Dr. Hudson to Kansas.
Dr O. S. Runnels to Indiana.

Dr. Hudson then presented "Education First, Legislation Afterward, if Ever," in which he follows very closely in the footsteps of Drs. Westover, Delap and others, denying the right of states to restrict the choice of the people in the selection of their medical advisers. This practically closed the sessions of the Missouri Institute, the remainder of the time before adjournment being taken up in the appointment of chairmen, and routine business, paying bills, etc.

The following are the chairmen:
Clinical Medicine, F. M. Martin.
Materia Medica, E. F. Brady.
Gynecology, T. G. Comstock.
Obsteterics, A. E. Neumeister.
Surgery, S. B. Parsons.
O. and O., R. Carr Block.
Pedology, J. L. Dryden.
Education and Legislation, C. J. Burgher.
Sanitary Science, T. H. Hudson.
Chemistry and Toxicology, F. B. Canfield.
Brain and Nervous Diseases, J. M. Kershaw.

At 5:47 the Missouri Institute adjourned sine die, closing one of the most eventful sessions of its long and useful existence, to meet as per regulations next year in Kansas City.

MISSOURI INSTITUTE ECHOES.

Perhaps the busiest man on the place during the sessions was Dr. J. Martine Kershaw, who had charge of the press reports This is, as is easily understood, one of the most important of duties since it implies the sending out to the great world through the lay press the best things said by the Institute; the press are proverbially coy about receiving technical copy, but in this instance through the careful supervision matter was each day ground out that was acceptable to and used by them in great part. The St. Louis papers redeemed themselves at the first but rather fell down towards the last, for our usual avenging angel pursued us—the triumphant base-ball club. Dr. Kershaw could be seen flitting in and out of the meetings at all hours reading papers assisting in the debates and yet watching the reporters as they approached the door.

Dr. W. B. Morgan, the sphinx of the Institute who always says something unexpected when he rises to address the audience, was as usual in his glory in the treasurer's corner. Dr. Morgan impresses everyone when he essays to speak with the feeling that he will say something original and he always does. Thus, in the paper of Maternal Impressions, presented by Dr. Grundman, the usual paper of a young man, when many remarkable instances of marking of babies had been recited and cautions given concerning others yet to follow—other babies—Dr. Morgan arose from his ledgers and cash box and quietly demolished the whole artistic fabric by declaring and appealing at the same time to his hearers for verification, that every woman at some time of her pregnancy will have these fears of marking her child and that as a rule the feeling of depression and foreboding disappears with the advancing pregnancy. That children are marked is very plain; but that they are marked with the frequency indicated in the paper and as gathered from text-books is not true. Give the woman the indicated remedy and dispel her gloomy thoughts.

Dr. T. Griswold Comstock, the same yesterday, to-day and tomorrow, was early on the ground and took prominent part in the legislation of the sessions as well as an animated part in the discussions. His little tip with Dr. Neumeister concerning the rupture of a woman at the fourth month of pregnancy was well received and turned on the tap of merriment at Dr. Neumeister's expense. But the dear doctor, while he likes to joke at the other fellow's expense, doesn't take quite so kindly to a joke on himself, as was evident when Pres. Cutler suggested that one of Dr. Comstock's remarks concerning a breakfast just before circumscision implied that the breakfast consisted of these peculiar appendages. Dr. Comstock makes a clear and forceful argument and is always listened to with attention, especially when he gives a good long mouth-filling Latin quotation.

Dr. Gundelach, the elder, is another *bon vivant* whose face fairly glows with amusement when he listens to a specially good story or paper in meeting. He is never at fault for a quick repartee, and the inquisitor must be lightning-like in rapidity to catch the elder Gundelach asleep. He took no active part in the sessions, but he graced most all of them with his courtly presence.

The retiring president, Dr. Wm. P. Cutler, of Kansas City, made a splendid presiding officer, being filled to the brim with wise saws and maxims and loaded down with parliamentary laws and practices. On two or three occasions he was put into pretty close quarters because of some of the questions presented for his decision but his decisions when given were correct and abided by. His whole conduct of the office of president was graced by great courtliness and correct rulings. Socially there is perhaps no finer instance of the man than is Dr. Cutler. He is full of fun and tells a story after the queen's own taste. Sorry he disappears from the horizon so completely as always does a retiring president.

Next to Dr. Cutler was Dr. Lizzie Gray Gutherz, the first vice-president, who took the chair during several of the more important sessions of the Institute and governed the meetings with rare discretion and uniform satisfaction to the audience. Dr. Gutherz is a fine talker and a good reader, with a paper always ready for a good audience, as was evidenced by her "Homœopathic Babies."

Dr. Schott, a character in his way, is a good offhand speaker and also a splendid shot with the long bow. He is always to be found on the side of the purest of Homœopathy and yet never in line with any crankiness. Dr. Schott has made his greatest success in the treatment of children's diseases and has filled that especial chair in the Homœopathic Medical College of Missouri for a number of years.

Ex-President Campbell was present during the first two days, but on the last day was reported ill in bed. Dr. Campbell is a hard worker, which accounts for much of his illness of the past two or three years. Dr. Campbell is always very popular and deservedly so with the college classes, and his former pupils regard him yet as one of their best friends and a boon companion.

Dr. McElwee will drift off into a sly attack on the high potency on every available occasion, and it sometimes looks as if he manufactured occasion. As the potency question was at no time sprung upon the Missouri institute his frequent dabs at it seemed to be somewhat out of place. Perhaps his phenomenal success with his obstetrical record, when without the aid of any other doctors, managed to get enough birth certificates from the board of health and so captured a prize in the east for greatest number of confinement cases within a given period of time—perhaps this success has made him bold, and he now seeks for a newer field in which to conquer further laurels, also unaided. The paper he read on *Calcarea phos.* was modeled so much after the pattern introduced by Dr. Kraft that a number of those near Dr. Kraft whispered that he must have had a hand in getting it up.

Dr. W. D. Foster was always an anxious enquirant when Van Scoyos proposed anyone's name for membership, whether the party had paid the $3, and if so he voted in the affirmative on his election. His treatment of varicocele attracted much attention and considerable discussion from other surgeons.

Dr. Scott B. Parsons, *pere,* is another instance of jolly party who knows a good thing when he sees it, and doesn't forget his friends at any time. He is the readiest speaker on the floor. He was a firm and consistent champion for the member who was eventually expelled during the session. He presented an interesting study on the myxosarcomata and in every debate in which he participated he was equal to the task and left his impress on all he touched. He is one of the jolliest of hosts as a number of his friends and well-wishers will willingly testify. There is no end to his fun and humor.

Dr. W. A. Edmonds was the usual affable and courtly gentleman of the old regime; painfully polite to the ladies and tastily daintiful in his *rapier* practice with the mails. His paper on *Ergot* stirred up a veritable hornet's nest of opinions and kept the audience at work for the better part of an entire evening's session to get their bearings once more as Homœopaths. Dr. Edmonds is a polished antagonist who will not take an unfair advantage of his oppo t ent. He is master of fence in all its varied applicanions.

Correspondence.

LETTER FROM INDIA.

Calcutta, India, March 14, 1894.

Editor Medical Century:

Homeopathy is still in its infancy in this side of the world. Properly speaking, we have no Homeopathic clientele in India. We generally get cases when they are given up by the so-called regular school of medicine. Homeopathy has been able to show its marvellous efficacy in curing these desperate cases. In India, Calcutta only can boast of having two dozen Homeopathic practitioners who once belonged to the regular school and who practice Homeopathy exclusively and successfully.

I am glad to inform you that the defunct Calcutta *Journal of Medicine,* which was once so ably edited by our colleague the Honorable Dr. Mahendra Lal Siscor, C. I. E., and which was almost the only organ we Homeopaths had, has now again begun to appear, from the New Year's Day, with its former editor.

We were fortunate enough recently to have among our midst Dr. W. Wesselhœft, of Boston. He came here in the beginning of February. He traveled all over India and was much delighted with our sanitarium, Darjeeling. From this place he went to take a view of the snowy range and Dhabalagiri, 27,000 feet above sea level and one of the highest peaks in the world. We passed three pleasant evenings with Dr. Wesselhœft. He left Calcutta on the 12th of February for Ceylon. He is expecting to return home by September next.

We are trying to resuscitate our Hahnemann club and I shall send you an account of our first meeting shortly when held. Our Homeopathic School and Hospital, containing ten beds, had a good and satisfactory record to show last year.

Hahnemann's birthday is annually celebrated by us in a public meeting. One of our colleagues is chosen to deliver an address every year. This year Dr. Younan will deliver the address.

Your fraternally,

34½ Beadon Street. B. N. Banerjee, M. D.

EDITORIAL CORRESPONDENCE — A TRIP DOWN EAST.

When President McClelland appointed the editor of this journal chairman of the transportation committee of the American Institute for the current year, he imposed upon us duties which have been found to be exacting, onerous and exceedingly difficult of performance, and which have necessitated the expenditure of a great deal of time and labor and, among other things, a trip to the Atlantic seaboard in the interests of the Institute's itinerary to Denver this summer. The esprit de corps of the railroads is much like that of the medical profession. Unless there is strict regularity in all the features of a medical or surgical consultation a patient may die a dozen times over before the follower of a real ethical course will o'erstep the bounds of his iron-clad code. So with the railroads. Unless the various passenger associations and all the members thereof agree upon rates for the conventions of the country in regular, formal and official manner said conventions may go to the "demnition bow-wows" and their members may walk to the convention place for all the railroads care. And such has been our experience in dealing with the railroads in the interests of the Institute this year. The country is divided into sections for railroad purposes. There is the Trunk Line Association, the Eastern Traffic Association, the Central Traffic Association, the Western Passenger Association, etc., etc. It is the rule that an association in whose territory a convention is to be held shall decide on a rate for said convention before other associations shall make similar rates to cover their territory. Denver is in the territory of the Western Passenger Association. This association is having an inter-association rate war over the Mid-Winter Fair business, and has failed to take action on rates to Western convention points this spring, though it has been repeatedly importuned to do so by the Institute's committee, and, we understand, by committees of other bodies whose conventions are to be held in its

territory during the summer. We have been caught in an unfortunate crisis and for a time it seemed as though we were to have no consideration at the hands of the lines running into Denver. Even to this writing the Western Passenger Association has not taken official action on our cause, though it has been before that body since last December, and it is only through the courtesy of the Chicago & Alton-Union Pacific route that we are able now to announce a reduction in rates and a thirty day ticket from Chicago and St. Louis to Denver and return, independently of the association's vote.

But even when the Alton came to our relief and gave the Western Association official notice of its action this did not settle the matter in so far as other associations are concerned, and it became necessary that the managers of the Eastern and Trunk Line asso iations should be consulted personally about a rate for their territories, this making a trip to Pittsburgh, Philadelphia and New York a necessity, and this trip has just been made. It was to us an interesting jaunt and we have determined to run the risk of being voted a bore in recounting for the (supposed) delectation of the readers of the CENTURY some of the incidents of the journey and in telling them of some things we saw, heard and learned while off on the jaunt.

PITTSBURGH.

To begin at the beginning, we left Chicago on the Baltimore & Ohio limited, one of the best trains of the country, on the afternoon of Sunday, April 1, reaching Pittsburgh the following morning. Of course as a dutiful appointee we had to see Dr. McClelland at once, and out to his elegant home in one of the delightful spots of Western Pennsylvania we betook ourselves. Have you ever been in Pittsburgh? No? Well, it just consists of a business portion down where the Allegheny and Monongahela rivers unite to form the Ohio and then you have to run out a few miles through what might be properly called "Stringtown" to where Dr. McClelland lives. We have always heard that he is an integral part of the great state of Pennsylvania and now we know why. He lives out in the state and goes to Pittsburgh occasionally for his mail. However, we found him "at home" to visitors, delightfully so, too, and right pleasantly was most of the day spent in conference over Institute affairs and railroad arrangements.

Of course the Pittsburgh Homeopathic Hospital was visited, and a treat it was to go through the wards and other appointments of this noble charity. It is a superb building, elegantly appointed in every respect, and the profession of the Smoky City are very proud of it. And justly may they be, for 'tis one of the largest and best Homeopathic hospitals of the world.

Here we had the pleasure of meeting Dr. Willard, our fellow committeeman for Pittsburgh in railroad affairs, one of the surgeons of the hospital; good Dr. Millie J. Chapman, fair, stout and professional, second vice-president of the Institute and one of the most popular and successful lady physicians of our school; Dr. J. Richey Horner, one of the bright young men of Pittsburgh's profession and correspondent for Western Pennsylvania for the MEDICAL CENTURY; and other members of the profession. Drs. Williard, McClelland and Horner escorted us through the hospital, calling attention to its many excellent features and making the visit as pleasant as possible. Especially did Dr. McClelland delight in showing his far-famed all-of-glass laparotomy room. It is the only one of its kind in this country, but, to his great disappointment, it has suffered the ravages of the winter weather until it is not as great a success as he would like it to be. Glass breaks and its jointings necessarily have to be somewhat rough, so it is not the perfect room it was expected it would be. Still it is a most excellent effort in the way of securing a completely aseptic operating room and with a little more experience in this line it is believed the glass men can make a glass room that will be in every way a complete success.

WASHINGTON.

At night we took the train for Washington. Every body knows Washington. It is the city on the Potomac where the American Institute of Homeopathy held its most delightful meeting two years ago. It is the city of Verdi, of Custis, of Gardner, of Macdonald, King and the rest of the jolliest and most hospitable set of men to be found anywhere. As good luck would have it the regular meeting of the Homeopathic Society of the District of Columbia occurred on the evening of the day of our arrival and it was our very great pleasure to participate in its deliberations. The subject for the evening was an exceedingly unfamiliar one—Venereal Diseases—but the skill with which those Washingtonians handled it led us to to believe that Washington is fruitful in this character of ailment. For several very able papers were read and from the extent and character of the discussion we were quite convinced that the profession of the Capitol City is a very talented one and that they have had l-a-r-g-e experience with all sorts of venereal diseases. Seriously, some very able papers were read and the discussions were unusually full of practical points.

After adjournment the writer was feasted in royal style and toasted in pure Capitolean fashion at the Shoreham. As at the beginning we now repeat, those Washingtonians are the most hospitable lot of folks in the kingdom. During the Institute meeting at Washington they made themselves famous as hosts and they haven't lost the gait then taken.

Next morning while making the rounds with Dr. Macdonald it was our pleasure to visit the National Homeopathic Hospital. The building is a four-story brick structure and admirably arranged and equipped for hospital purposes. It has seen active and continued usage, until it begins to show necessity of remodeling and brightening in some respects, but it is, withal, a hospital of which the profession of Washington have no cause to be ashamed, and in which excellent work is being done for Homeopathy. Its annual report is now running through the press, from which, when completed, we shall collate some figures and facts which redound to the credit of the profession, whose hospital it is.

During our visit to the hospital we had the pleasure of witnessing an exhibition of Nitrous Oxide Gas Anesthesia at the hands of Dr. Macdonald and his anesthetist, Dr. Seward. To say that we were most favorably impressed would be putting it mild, indeed. The patient was a weak colored girl suffering from post-uterine abscess. Her temperature was 104½, and there were present, pain, emaciation, apprehension,

rapid and wiry pulse, and general systemic disturbance. Of a naturally timid race this girl was greatly distressed at the thought of having to be "put to sleep" and operated upon, and was by no means a good subject. But the anesthesia was quickly accomplished, in one third the time it would have taken for ether, and the unconsciousness was as profound as would have been necessary for a coeliotomy. The patient was under its influence fully fifteen minutes and awakened with absolutely no nausea, headache, shock, or other unpleasant symptom, and almost instantly that the inhaler was removed from her face. So favorably were we impressed with the procedure that we shall at once provide ourselves with an apparatus and begin its use. To our mind Dr. Macdonald is performing a real service to the profession and mankind in pressing the subject of Nitrous Oxide anesthesia in general surgery.

PHILADELPHIA.

At Philadelphia it was our pleasure, in company with our chaperone, Dr. Macdonald, to meet Prof. John E. James and Dr. W. B. Van Lennep in consultation over a matter soon to be brought to the attention of the profession. Prof. James is senior surgeon to Hahnemann College, and Dr. Van Lennep is one of the rising men of the country in the use of the scalpel. Both are thorough-going in their surgical performances, and they make a strong team for Philadelphia.

Dr. Pemberton Dudley, secretary of the American Institute of Homeopathy, accompanied us to the offices of the railway companies headquartering at Philadelphia, with whom he had to deal on railway business, and Dr. W. W. Van Baun, member of the committee for that city and vicinity was found to be giving the subject his personal attention; so the profession of the neighborhood will have their interests well conserved. Dr. Winthrop Talbot, who happened to be in the city for a few days, gave us a pleasant call, and an hour was profitably spent with him. The doctor is one of the young men who is in earnest in his profession, and it may be expected that he will be heard from in the future.

NEW YORK.

Business soon through with in Philadelphia, New York was next visited. No sooner had we landed in this busy Eastern suburb of Chicago than were we taken in tow by Drs. W. A. Dewey and A. B. Norton. Both are jolly good fellows, both thoroughly interested in securing a large crowd from the East for the Denver meeting, and both as enterprising and energetic as if they were Western men. Various courtesies and assistances were extended by them during our brief stay in the city, for which proper acknowledgments are duly made. The Pennsylvania officials were found to be exceedingly approachable and but little difficulty was experienced in getting them to urge the management of the Trunk Line Association to make us a rate for the Denver meeting. In company with Dr. Dewey the office of the chairman of that association was visited and before leaving his desk we were assured of a round trip rate and one-third to the Eastern termini of the Western Association territory, with the promise that a one fare rate for the entire journey would be urged. To this writing no notice has been received that this action has been taken, but it is still hoped for.

Of course Helmuth House was visited. A trip to New York without a call upon Dr. Helmuth would be no trip at all. The doctor was "At Home," as always to his friends, even though they be legion, and the courtesies of Helmuth House were cordially extended the stranger within the gates, even to the amputation of a leg if desired. In its every appointment this magnificent private hospital is elegantly, even elaborately equipped, and its operating room is a perfect gem, the nicest and most attractive we have yet seen. Dr. Helmuth is justly proud of it and it must be a real delight to be operated upon in it.

In company with Drs. Helmuth, Norton and Bishop, Dr. Helmuth's resident surgeon, a visit was made to the New York Homeopathic College and Flower Surgical Hospital. The college is a commodious brick structure, complete in every appointment, and especially well situated for clinical material. A good class of students all of the sterner sex, are in attendance, and the senior class, to whom Dr. Helmuth gave us introduction, is one of the best ever gathered in the walls of the institution.

The hospital, the munificence of Gov. Flower, adjoins the college, and is of invaluable assistance to the students in their surgical studies. It is perfect in every detail, and its ambulance service gives to it especial interest in the surgery of accidents, etc. One of the city districts is assigned the hospital and it is not uncommon for the ambulance to be called out several times a day.

Dr. Sidney F. Wilcox, orthopedic surgeon to the college and hospital, was lecturing at the moment of our arrival in the clinical amphitheater of the hospital. Dr. Wilcox is also surgeon to the Laura Franklin Free Hospital for Children, and is deservedly looked upon as one of the ablest surgeons of the East.

Of course we had to see Drs. Porter and Roberts of the *North American*. Our editorial life wouldn't be worth living were we to have passed them by, so we didn't. Whole-souled, hospitable, full of the esprit de corps of the journalistic profession, they gave their "wild-eyed contemporary" from Chicago a hearty welcome, and a most pleasant hour resulted. The *North American* is a good journal—a very good journal, and if its readers but knew how many sleepless nights and hard-spent hours were put in on the work connected with its issuance by its editor and business manager they would appreciate the journal even more than now, if this were possible. It is very jolly for medical editors to meet face to face once in a while, even if they do tickle each other under the short ribs with the knife of sarcasm and unlovableness occasionally. And we enjoyed our morning call made in company with Dr. Dewey, upon these editorial brethren.

Dr. and Mrs. St. Clair Smith, who extended us the hospitality of their genial home, added to the pleasures of this hasty trip to New York in no small degree, and Dr. and Mrs. S. H. Vehslage are kindly remembered in similar relation.

Taking all in all we are quite convinced that our former impressions are correct, viz, that all the hospitality, all the whole-souledness, all the brotherly love that exists in the medical profession is not confined to "the Wild and Woolly West." If you don't believe it go and see for yourself. C. E. F.

April 20, '94.

The Colleges.

HAHNEMANN MEDICAL COLLEGE, CHICAGO.

The thirty-fourth annual commencement of Hahneman Medical College of Chicago occurred at the Grand Opera House, April 5, at 2 o'clock P. M., in the presence of a very large and thoroughly representative audience.

The exercises were begun by an invocation by the Rev. Mr. Martin. This was followed by the valedictory address by Rev. Reese B. Kester. Next in order came the report of the registrar, Prof. J. P. Cobb. The presidential address and presentation of diplomas by Prof. R. Ludlam was a feature of the occasion which was especially enjoyed by the successful candidates for the degree of doctor of medicine.

Prof. H. B. Fellows, dean of the college, awarded the prizes. The trustees' prize of fifty dollars was awarded Dr. Emly L. Hill, New York; second prize, twenty-five dollars, Dr. Chas. E. Kohlke, Illinois; McIntosh prize, consisting of office switch board, etc., valued at one hundred dollars, for best examination in electro-therapeutics, Dr. Catherine Clapp, Illinois; Prof. Shears' prize for best report of his Monday and Wednesday clinics, Dr. Catherine B. Clapp, Illinois, Dr. Mary O. Hoyt, Iowa and Dr. Frank O. Higbee, Minnesota.

For hospital appointments for 1894, Drs. M. G. Owen, Nebraska, J. M. Clark, Kansas and Elizabeth C. Mass, Wisconsin, were the successful candidates. Hahnemann College's appointment as surgeon to Cook County Hospital, Dr. Cas. E. Kohlke, Illinois.

The banquet of the Alumni Association was given at the Hotel Auditorium in the evening at which there were about three hundred present. A delightful menu was enjoyed after which the following intellectual program was carried out:

Toasts—"Our Alumni," Prof. H. V. Halbert; "Our Trustees," Hon. Erskine M. Phelps; "Our Faculty," Prof. C. H. Vilas; "Our Hospital," Prof. George F. Shears; "Our College," Prof. Jos. P. Cobb; "Our Friends," Drs. O. W. Carlson, Milwaukee, Chester G. Higbee, St. Paul and I. W. Sawyer, Minneapolis; "The Girls of '94," Dr. Catherine B. Clapp; "The Boys of '94," Dr. H. Traverse Cole. Drs. Ludlam and Fellows followed the regular toasts with wholesome advice and hearty congratulations to the graduating class and the festivities were closed for the session.

HERING MEDICAL COLLEGE, CHICAGO.

The second annual commencement of Hering Medical College and Hospital took place in the Grand Opera House, Chicago, on the afternoon of April 10, Hahnemann's birthday, in the presence of a large and select audience of friends of the college and the graduating class.

The exercises were gracefully presided over by Telford Burnham, Esq., president of the board of trustees, and were opened by invocation by Rev. Willard Scott, D. D., pastor of the South Congregational Church, Drexel Boulevard.

Dean H. C. Allen, M. D. gave a brief address relating to the organization of Hering College and its history to date, this being followed by a comprehensive report by the registrar, Dr. C. W. Day, who resented the names of twenty-one successful candidates, out of a class of twenty-four seniors, who had showed sufficient proficiency to entitle them to their degrees. A notable feature of the registrar's report was the wide scope of country represented in the graduating class. They came from England and from Maine to California. Nearly every State in the Union was represented in the attendance upon Hering College this year.

President Burnham delivered the diplomas in a well-chosen address, the class arranging in a half circle on the platform while receiving their degrees. The Oxford cap and gown were worn throughout the exercises, the effect being impressive and generally harmonizing.

The address of the afternoon was delivered by Rev. Dr. Scott, who delighted everybody with his splendid humorous and intellectual effort. Dr. W. J. Hawkes, delivered the faculty valedictory, which was characterized by its breadth and wisdom, and the class valedictory, a highly creditable production, was given by Dr. W. H. Shaw, of Massachusetts.

Music by the opera house orchestra was interspersed throughout the exercises and everything connected with the second commencement of Hering passed off delightfully.

The banquet and alumni meeting was held at the Windermere in the evening, and was pronounced one of the most delightfully informal and enjoyable occasions of its kind.

The following candidates were successful in their examinations and received their degree: H. N. Baker, M. H. Bell, Louise M. Blinn, W. A. Bonniwell, May C. Currier, C. W. Klinetop, T. E. Kirby, Bertha M. Nelson, John Nicholls, Mrs. Mary K. Mack, A. S. Pease, Grace C. Pulver, Philip Rice, C. E. Sayre, W. H. Shaw, W. W. Stafford, Hubert Stratton, Mrs. A. E. Whitfield, E. H. Wilsey, Ulysses S. Barr, Ida M. Wagner.

The ad eundem degree was conferred upon Dr. P. C. Majumdar, of Calcutta, India.

PULTE MEDICAL COLLEGE.

Pulte Medical College, Cincinnati, held commncement exercises for the graduation of the class of '94 at the Scottish Rite Cathedral, Tuesday evening, March 27. The exercises were of a most interesting character throughout, as attested by the following program:

Music.
Prayer.....Rev. R. H. Rust.
Introductory remarks.....J. D. Buck, M. D., Dean.
Music.
Address.....Rev. R. H. Rust, D. D.
Music.
Valedictory, Class of 1894.....Frank W. Murphy.
Music.
Faculty prize.....C D. Crank, M. D.
College degrees.....Thornton M. Hinkle, Pres.
Music.

The graduates for 1894 were:

I. J. Herr, Ohio.
G. S. Hodson, Ohio.
F. E. Kinney, Kentucky.
L. R. LeLande, Texas.
F. W. Murphy, Ohio.
H. D. Rule, Ohio.
R. C. Smallwood, Texas.
H. B. Simmons, Ohio.
Al F. W. Schleiffer, Ohio.
M. E. Topping, Mich.
W. H. Webster, Ohio.
G. W. Woods, Ohio.

On the honor grade were:

A. F. W. Schleiffer, 99 10-13 and gold medal.
G. W. Woods, 99 9-13 and Geo. W. Smith pharmacy prize.
R. C. Smallwood, 98 8-10.
G. S. Hodson, 98 6-10.
H. D. Rule, 97.
A. F. W. Schleiffer also received Materia Medica prize.

Medical Century

An International Journal of Homeopathic Medicine and Surgery.

C. E. FISHER, M. D., - Editor.

ASSOCIATE EDITOR:

W. A. DEWEY, M. D., New York.

Chicago, May 1, 1894.

DENVER! DENVER!! DENVER!!!

As the time draws near for the Semi-Centennial Jubilee meeting of the American Institute of Homeopathy, to be held in Denver, June 14th to 22d inclusive, interest begins to awaken, and all indications point to a really great meeting. At no time in its history has the Institute held a meeting so far West. Naturally enough there has been a fear that because of the selection of so distant a point the meeting might not be as largely attended as if an Eastern city had been chosen. But this fear is unfounded, as all similar occasions show, and the June meeting will be one of the very best the Institute has ever held if we read the signs of the times aright. A great many conventions have been held in Denver and all have been largely attended. The Knights Templar convention was one of the largest that order has ever held. So with other bodies that have chosen that city as their meeting place. The great West turns out a large attendance, always, when a Western city is named, just as the East turns out a large attendance when conventions are held in its territory. Then, too, there is much of interest to the Eastern people in a trip out West, and the Rocky Mountains afford such great attractions for the vacationist and tourist that there is always a large attendance from every part of the country at conventions held there. Our recent trip to the Atlantic seaboard, mentioned elsewhere, convinced us that there will be a large attendance from that section, and this with the unusually large attendance from the mighty West will so swell the roster that the number will run well up toward, if not beyond, the regular attendance when the meetings are held in the Eastern part of the country. There need be no fear that the Denver meeting will be slimly attended. On the other hand we have been led to believe from all that can be seen and heard that the attendance will be an unusually large one.

But, no matter what its size, it may safely be predicted that the meeting will be one of the best and most enjoyable in the history of the Institute. It will be its semi-centennial jubilee session. A special program has been prepared for the occasion, and this promises unusual pleasures. Dr. I. T. Talbot, of Boston and the Eastern part of the United States, will review the first quarter of a century of the Institute's history. Dr. J. P. Dake, of Nashville and the Southern part of the United States, will bring up the history of the second quarter of a century. Dr. Amelia Burroughs, Omaha and the Northwest, will discuss Woman in her relation to the Institute. Dr. R. Ludlum, Chicago and the Lake region, will tell us of the future of Homeopathy, and Dr. Wm. Tod Helmuth, of New York and the whole United States will read one of his inimitable poems, this alone "being well worth the price of admission." This jubilee program will be celebrated on the evening of Thursday, June 14, the opening day. On Friday afternoon "The Meissen," the women's club, will give an informal reception from three to five. On Saturday evening, 8:30 to 11:30, there will be a full dress reception in the parlors and extensive corridors of the Brown Palace hotel, to which leading citizens and officials of Colorado are invited. "No dancing" is specified on the program. Glad of this. We don't d-a-n-c-e! The excursion to Silver Plume mountain is so arranged for as not to interfere with the regular program of the convention, and the Memorial service of the Institute will be held Sunday evening. From Monday on, afternoon and evening entertainments, not to interfere with the work of the convention, will be arranged for, the Denver profession being determined to make the occasion one of the most enjoyable in the history of the Homeopathic profession.

And the professional features of the meeting are to be of an unusually high order. All of the sectional chairmen are at work in earnest and the list of papers promised insures an extra profitable session. Especially promising are the sections in Materia Medica, Surgery and Gynecology. Others will doubtless be equally satisfactory, but to our knowledge the ones mentioned are to be star bureaus.

The railroad attractions are of an unusually high order. The trunk lines from the east tender us the courtesy of a one and a third fare round trip ticket to St. Louis and Chicago, and from these points the Chicago & Alton-Union Pacific combination of lines give us "American Institute of Homeopathy Specials," with no one but physicians and their families on board, a one fare for the round trip, a thirty day ticket that we may put in the usual summer vacation in the mountains, and special mountain excursions complimentary to the Institute. Other lines which had not the courage to offer the one fare until the Alton took the initiative are making similar offers, but the Alton and Union Pacific have been selected as the official route and through American Institute Homeopathy specials will be run that we may have the pleasure of journeying together in our own vestibuled railway caravan. In Colorado and Utah the lines have all agreed upon a one fare trip and a fifteen

day excursion ticket for those attending the meeting, and specially pleasant side trips are being arranged for us that we may see the Rocky Mountains in all their beauty and grandeur. The "Circle Trip" is one of the best offered, and an excursion over the Rockies to the famous Glenwood Spring, the Lucerne of America, is one of the most delightful attractions of the occasion.

It is perfectly safe to promise to its members and the entire Homeopathic profession not only one of the largest and best meetings the American Institute has ever held but also one of the most delightful summer outings the United States affords. It remains for the profession to take advantage of the unusual pleasures in store for us, and, this given, the meeting of the American Institute for 1894 will pass into history as the star meeting of the national association.

ELEMENTARY EDUCATION.

Not only in the A B C of medicine but in readin', writin', spellin' and 'rithmetic there is an apalling remissness in the requirements made of candidates for entrance upon the profession of medicine, and, we may add by way of self justification and with passing malice, of the legal profession too. Just why doctors and lawyers consider themselves as exempt from any necessity of a knowledge of the rudimentary elements of the president's Americo-English is a riddle which awaits the speaking of the Sphinx. But the fact remains, nevertheless, and very greatly to our discredit, that the standard of literary education demanded of candidates for the study of medicine is altogether too low. If education is of any import it is of tremendous import. A man is a better lawyer, doctor, merchant, chief, rich man, poor man, beggarman, thief, if he can read and write and spell correctly in the language of his nativity than if he is as limited in his education as many men in the medical profession are today. It should certainly be demanded of every candidate for entrance upon the profession that he shall at least be able to spell his own name correctly, that he doesn't wonder which is correct, "I seen" or "I have saw," that he shall not dot his "e's" in order that they may pass for "i's" if challenged and then fuss and fume at the editor because his contributions to the journals are so full of "typographical errors," and that he shall know and be able to give proof of knowledge of the kinship of a preposition to its case, that he shall not pronounce "between you and me" "between you and I," and that he shall not do a whole lot of other little things that go to make up the don'ts in the education of the school boy of to-day.

It may seem hard on the medical profession to suggest that they are sadly deficient in these regards. But they are, nevertheless, and 'tis not to our credit that 'tis so. It may seem hard that reflections should be cast on a man because he has great abilities in the lines of dosing, bone-sawing and cœliotomies and none in the line of spelling. It may even seem to some that little things like these are not necessary in the composition of the great doctor. But the age is a scholarly one, and that profession which does not countenance and encourage and make necessary the culture and refinement and advantages of a general education is of the rear guard and will be ridiculed and sneered at and made fun of by the brighter, broader and more generally informed minds of the day and of other professions.

The medical profession should be of the van guard. It has the right of precedence if all that has been preached and taught and sung of its high aims, its ennobling possibilities and its wide reaching accomplishments be true. It must lead in education as in other virtues, for education is a real virtue. It is a crying shame that the man whose profession calls him into the midst of culture and refinement must enter upon his trust depending upon what he can "pick up" as he goes along in the way of general education, to buoy him in such clear, deep water. It is unjust to him and decidedly unjust to his future possible clientele. It should certainly be required of all men that they be educated in English before entering upon the study of medicine. If a man shall have educated himself in English in times gone by so much to the credit of the man. But the palmy days of the closing years of the nineteenth century demand better things of medicine, of law, of all professions, than did the less palmy days of three or even of two decades since, and the self-educated man, the self-cultured man is no longer a necessity. All honor to those among us who have risen to creditable heights without the college education that every man who enters upon our profession today should have before beginning the study of medicine. They have won honor, fame, position, in spite of themselves. But because they have done this is no reason why the man recently entering the field of medicine should write "himself" with a capital H, should decapitate the word "Chicago," or should tell us "The Century has came to me regular since the beginning." And 'tis to convince such a man and such men at large that they are unreasonable and unreasoning that we are prompted to write these words upon this subject at this time.

Editor's Table.

Dr. Louis A. Shultz has opened an office at 338 East 63d street, near Madison Ave., Chicago.

Dr. Gustav Futtered has removed to the Venetian Building, Chicago, with office hours from 11 to 2.

Dr. W. G. Willard, Chicago, has removed his office to his residence, 643 Washington Boulevard between Lincoln and Robey streets.

Dr. H. Ballou Bryson, Pittsburgh, Pa., has removed his office to the New Methodist Episcopal building, 524 Penn. avenue.

The rotund, genial, jolly, and accomplished A. Leight Monroe, M. D., Louisville, has been elected dean of the Southwestern Homeopathic Medical College. Splendid selection.

Dr. A. B. Avery, Pontiac, Michigan, who is taking post graduate work in Chicago, paid the CENTURY office a pleasant call last month. The CENTURY is always glad to see its friends.

The Washington State Homeopathic Medical Society will hold its fifth annual session at Tacoma on the 8th instant. This is one of the live societies of the great Northwest, and a good meeting is looked for.

Dr. W. K. Foote, Chicago, has lately removed his residence and office to "The Marlborough," corner Calumet avenue and Forty-ninth street. His down town office remains in the Marshall Field building with hours from 3 to 5.

Michigan's State Society will be held this year at Battle Creek on the 15th and 16th of May. An interesting and profitable session is looked for. Dr. J. C. Nottingham, Bay City, is president, and Dr. R. S. Copeland, same city, is secretary.

Dr. J. Richey Horner, Pittsburgh, has taken a city office at 524 Penn. avenue. His residence is in Allegheny. Dr. Horner is the very much alive correspondent of the MEDICAL CENTURY for Pittsburgh, and a promising man in the profession.

Dr. C. G. Higbee, St. Paul, Minnesota, spent a few days in Chicago, recently. Mrs. Higbee accompanied him. Their son graduated at Hahnemann Medical College, and at the alumni banquet Dr. Higbee responded to the toast "Our Friends."

The eighth annual commencement of the Pittsburgh Training School for Nurses was held at the Homeopathic Hospital, that city, on April 12. There were nine successful applicants for the degree of the school. Dr. L. H. Willard is dean of the faculty.

The Missouri Institute of Homeopathy men know how to get up a program for their state meetings. The program of last year was a work of art, and that for the meeting of last month was one of the most clever we have yet seen. Nice printing catches the eye of the artist every time.

The Kansas State Homeopathic Medical Society will meet on the 2d, 3d and 4th of this month at Seneca. Our Kansas friends have one of the best societies in the West, and its meetings are always well attended and interesting. The meeting of this year promises to be a large and profitable one.

The Kentucky State Homeopathic Medical Society will meet at Lexington on the 15th, 16th and 17th of May. Kentucky has the liveliest Homeopathic State Society in the South, and the Lexington meeting promises to eclipse all former sessions. It is to be hoped the clans of the Blue Grass State will turn out in force.

Dr. Millie J. Chapman, Pittsburgh, has been honored from abroad by a request from India for permission to have translated in the native language her paper on Pre-Natal Influences, which appeared in the MEDICAL CENTURY last summer. It is to be issued in large numbers for free distribution among the women of India. A deserved compliment to a worthy woman.

Dr. and Mrs. T. Griswold Comstock, St. Louis, who are just returning from a winter vacation on the Pacific coast, spent a few days with their professional friends in Chicago last month. The CENTURY acknowledges the compliment of a pleasant call. Dr. and Mrs. Comstock went as far northwest as Vancouver, and very much enjoyed their extensive journey.

The handsomest college commencement announcement which has (not) been received at the office of the MEDICAL CENTURY, is that of the Southern Homeopathic College, of Baltimore. We caught a glimpse of their announcement while East, last month, and it is truly a work of art. The college had a good graduating class this year, twelve in number, we understand.

Dr. A. Cuvier Jones, Canon City, Colorado, paid the CENTURY a social call the middle of April. Dr. Jones has been spending a part of the winter on the Pacific coast and visited Chicago for post graduate work before resuming practice. He reports the entire profession of Colorado awake to the coming meeting of the American Institute and predicts a pleasant and successful session.

The faculty and graduates and friends of Hering Medical College, Chicago, are rejoicing greatly over the fact that at the meeting of the Illinois State Board of Health which took place on the twenty-fourth of April, full and complete recognition was given the diploma of that institution by the state board. The MEDICAL CENTURY'S congratulations to this really meritorious college are most heartily extended. It is a recognition that is richly deserved.

The Baltimore *Sun* gives a good account of the commencement exercises of the Southern Homeopathic Medical College, which were held on the afternoon of April 12, at the Lyceum theater. There were twelve graduates, including two ladies, and the class is pronounced an unusually promising one. The third annual banquet to the alumni association was held in the evening and a most enjoyable occasion was the result. Baltimore is congratulated upon her college success.

The Louisville *Courier-Journal* announces as an item of news that at a recent session of the Kentucky State Board of Health the Southwestern Homeopathic Medical College was added to the list of recognized reputable colleges, and we are informed that this action was taken by the old school members of the board without the presence, even, of the Homeopathic member. This is quite a compliment to the young college, and shows that it is looked upon with favor in its own bailiwick.

Dr. J. P. Hershberger, Lancaster, Ohio, writes the MEDICAL CENTURY that Homeopathic physicians will find good locations at Groveport and Winchester, Franklin county; Thornville, Junction City, Corning and New Straitsville, Perry county; Millersport, Baltimore, Carroll, Pleasantville, Bremen, Sugar Grove and Amanda, all in Fairfield county, Ohio. Dr. Hershberger will take pleasure in giving information in regard to any of these points, and hopes to see them occupied by physicians of the new school this spring.

Dr. Eugene F. Storke, Denver, Colorado, chairman of the Institute's local committee of arrangements, made the CENTURY office a pleasant call on the twenty-fourth of last month and gives a most satisfactory report of the progress of the Denver profession toward a successful meeting. They have pitched for the mark set them by the Washington

profession, and do not propose to be outdone. A royal time may be expected. Let everybody go. Dr. Storke says we will find Denver's latch string hanging away out on the plains of Western Kansas.

The Nebraska State meeting will be held in Omaha, June 11th–13th, just before the convening of the American Institute at Denver. Those who attend it will have time to get to the Denver convention by taking the night trains, and thus will have an unusually long time at medical associations this summer. Dr. Amelia J. Burroughs is president-ess of the society.

The Ohio State Homeopathic Association will meet at Toledo, on the 8th of this month, and will continue in session three days. This meeting promises to be an unusually interesting one and should be largely attended by the clans of the buckeye state. The legislative fight which has been pending during the winter should arouse our forces to unusual action, and if the profession of Ohio is awake to the necessities of the occasion it will turn out in force at Toledo.

The business manager of the CENTURY is off east for a short trip on business and pleasure, and if things go wrong in the business department for the next week or two the blame should be made to attach to the editorial helm. The MEDICAL CENTURY's business affairs have grown to be quite magnitudinous in proportion and require a thorough going business hand at the desk. Be a little patient, therefore, for a week or two, if business matters are not as promptly attended to as usual.

At the banquet following the first commencement exercises of the Southwestern Homeopathic Medical College, Louisville, Dr. Sarah J. Millsop, Bowling Green, a member of the faculty of the college, responded to a toast to Co-Education in Medicine which was in every way a creditable effort and full of information in regard to the struggle incident to the invasion of the profession by the ladies. Her remarks have been printed in full in her home papers, and have elicited much favorable comment. They will be reproduced in the next number of the MEDICAL CENTURY.

The Indiana Institute of Homeopathy will meet at Indianapolis on the 17th and 18th of May. No meeting was held last year on account of the great gathering at Chicago, and those in charge of the society hope to have it pick up where it left off and go on with its usual gratifying success. Very much depends upon the state societies for the general growth and prosperity of the profession and the hoosiers will do well for themselves and their cause if they will all spend a day or two at the appointed time in Indianapolis. They will be given a warm welcome by the local profession.

Dr. H. E. Beebe, Sidney, Ohio, and Dr. T. M. Stewart, Cincinnati, respectively chairman and secretary of the Legislative Committee of the Ohio State Homeopathic Medical Association, are out in a card appealing to the profession to help defeat the medical bill before the House on the grounds that as reported back it will give the old school too much power and will endanger the interests of the other schools of practice. It is to be hoped if this be the case the measure will be defeated beyond resurrection. Homeopathy is too strong in Ohio to allow the old school to tie us down with measures not satisfactory to us.

His hundreds of friends in the profession will be rejoiced to know that their pharmaceutical friend, Theodore Engelbach, New Orleans, the watchdog of the treasury of the Southern Homeopathic Medical Association, and formerly publisher of the Southern Journal of Homeopathy, is now a full-fledged M. D., having received the degree of the Medical Department of the Tulane University of Louisiana, New Orleans, on the 18th of April. Dr. Englebach will be warmly welcomed into the ranks of the profession with which he has so long been indirectly connected, and a bright future in it is predicted for him. He graduated with "special mention," and took also the degree in pharmacy of Tulane University.

From the Lowell, Massachusetts, *Daily Courier*, a copy of which has been sent us by Dr. G. Forrest Martin, it is learned that a new Homeopathic Dispensary, to be conducted upon strict Homeopathic principles, has just been organized in that city. Dr. E. H. Packer was chosen president of the association and Dr. Martin secretary. A house has been leased on Lee street in which the dispensary will immediately be opened and the CENTURY is promised reports of its work from time to time. The promoters of this dispensary movement are energetic men, thorough-going in their Homeopathy and mean to give to Lowell's poor and needy the benefit of the methods of practice they follow in their private work. Success to the undertaking.

The Homeopathic profession of Milwaukee show signs of wakening from a long and quiet sleep. In a recent number of the *Telegraph* was presented an interview in which a prominent business man descanted upon the standing of the school in that city, and gave a list of names of physicians and of prominent people who patronize the new school which is thoroughly creditable in every way. It is a matter of some surprise, in fact, when the strength, numerical and professional, of our colleagues of that busy city is considered, and when the strength of its clientele is taken into account, that we haven't a good hospital and dispensary in Milwaukee. There should be a rattling of the dry bones and efforts put forth to give to that city one of the best and most substantial hospitals in the west. What is the matter with bringing this subject up for consideration at the meeting of Wisconsin's State Society, to be held in Milwaukee on the 29th and 30th of this month? The MEDICAL CENTURY hopes the suggestion will be acted upon, and that ere another year shall have passed Milwaukee will have under way one of the best hospitals of this country belonging to Homeopathy.

The annual reunion of the alumni association of Old Hahnemann Medical College, Philadelphia, will be held at the Hotel Stratford, on the evening of Tuesday, May 8th. Dr. I. T. Talbot, Boston, is president this year, and Dr. W. W. VanBaun is permanent secretary. The feature of the approaching meeting is the celebration of the fortieth anniversary of the entrance of Dr. A. R. Thomas, for twenty years dean of Hahnemann College, upon the profession of medicine, and it is proposed to duly honor Dr. Thomas in this connection. The alumni association has determined to do this in a practical way by raising the sum of five thousand dollars with which to endow a free bed in the Hahnemann Hospital to be named the Amos Russell Thomas Free Bed. There is good sense in this proposal and the alumni of Old Hahnemann should raise this amount in a single day and thus honor the grand old man who has served them so long and so well. The MEDICAL CENTURY is gratified at having received an invitation to be present and to participate in the festivities of the

occasion, and hastens to inform its friends in Philadelphia that a plate for one may be reserved.

The Illinois State Homeopathic Medical Society, of which Dr. A. K. Crawford is president and Dr. Wesley A. Dunn is secretary, will meet at Quincy on the 15th, 16th and 17th of this month. Last year the association held no meeting because of the Chicago Congress. This year its meeting promises to be an unusually good one and many topics of general interest will be brought up for consideration. Not among the least of these, as at all the state meetings this spring, will be the question of funds for the Hahnemann monument. The general committee having this movement in charge has assigned to Illinois the sum of six thousand dollars, this being considered our proportion of the amount desired, and as we love the name of Hahnemann and would see him and our cause justly honored we should raise this amount without trouble. If each will but do his share there need be no difficulty in securing the entire sum. The professional features of the meeting promise unusually well and the attendance should be one of the best the society has had for years. Drs. Crawford and Dunn are doing their work faithfully and well, and their efforts should be most heartily seconded by every member of the profession of this state. Let the Quincy meeting go down in history as the best ever held in Illinois.

The women of the profession, bless their dear souls, how they do get after us if we seem in the least to overlook them! No one will ever forget the churning the men received at the hands of Dr. Smith on the opening night of the World's Congress, last summer, because "there are not more women on the program," even though the women outnumbered the stronger sex on that program to the tune of more than three to one, numbers in the profession being considered. And now comes our good Dr. Millsop, one of the staunchest friends this journal has in the profession, pouncing on us in good fashion because the MEDICAL CENTURY did not bring to mind but four colleges in our profession that have women members on their faculties. It was an oversight, good doctor, and we hope we will be forgiven for it. Boston has women on her faculty; New York has a college whose faculty is largely made up of members of the once-gentler sex; Baltimore has women in her teaching corps; Louisville follows, and has one woman, Dr. Millsop, among her incorporators and professors; St. Louis has Dr. Lizzie Gray Gutherz, and Kansas City keeps up the pace; San Francisco has a woman or two on her teaching staff, and both colleges in Cleveland have honored the sex by giving them place as teachers; Chicago comes along with two colleges recognizing the rights of women in this direction—and we believe this covers the list. If it does not, ladies, all you have to do is to go for our scalp from behind the barricade of an ink bottle and we'll surrender at once. We are a ladies' man, first, last, and all the time. For haven't they come to stay? And is there any use in trying to be anything else but a ladies' man if one wanted to? Furthermore, we have never tried. The CENTURY is glad to make the correction.

Dr. Walton, of Cincinnati, is somewhat of a fighter when he gets started, and the present contest before the board of management of the Cincinnati hospital gives him just the chance he has been waiting for, for lo these many years. At the recent conference over the matter, he is reported by the Cincinnati *Commercial-Gazette* as follows:

Dr. Walton in his speech sprung a few statistics which nearly paralyzed the doctors of the old school, the substance of which is as follows:

"At the last session you were told that the only basis of a claim for a position upon the medical and surgical staff of your institution was fitness. For the Homeopathic profession I accept this single statement, and shall endeavor to show that this special qualification does not reside alone with the advocates and practitioners of traditional medicine.

"By their fruits ye shall know them is a dictum which should be revered for its age even if challenged for its origin. The fruits which we exhibit today are those gathered by the undertaker, or, in modern parlance, the funeral director.

"For the enlightenment of the advocate of fitness, and in defense of the much maligned Cook County Hospital, in whose Augean wards Chicago's poor are stabled and doctored, let us compare the results of the work done in the Cook County Hospital with the results in the Cincinnati Hospital.

"In the Cook County Hospital during 1890 there were 8,214 patients; 705 died. Mortality 8.5 per cent.

"In the Cincinnati Hospital during 1892 there were 3,797 patients; 447 died. Mortality 11 per cent.

"Was this difference of more than 3 per cent in favor of the Cook County Hospital due to the presence of irregular practitioners in those filthy wards?

"Cook County Hospital during 1890 treated 551 cases of typhoid fever, and lost 61. Cincinnati Hospital during 1892 treated 61 cases of typhoid fever, and lost 9. There must be something salutary in Chicago's dirt and her irregular physicians. Cook County Hospital treated 206 cases of pneumonia, and lost 65. Cincinnati Hospital treated 65 cases, and lost 28. Cook County Hospital treated 81 cases of pleurisy, and lost 2. Cincinnati Hospital treated 25 cases and lost 4.

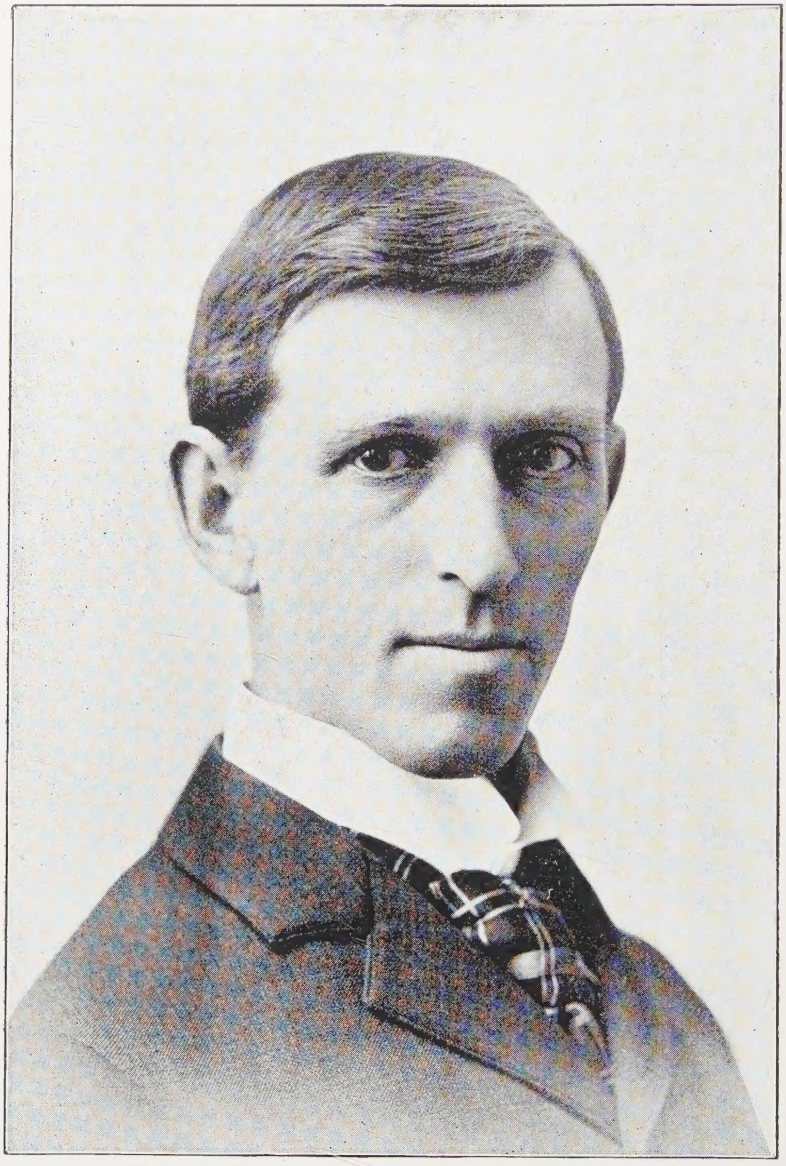
"Surely the persistency with which the Cincinnati patients insist upon dying in such an increased ratio is but an exhibition of pure wilfulness, and not due to their superlatively clean surroundings and regular medication.

"During the last five years in Cook County Hospital the Homeopathists have lost 766 out of 8,509 patients. The Allopaths have lost 3,340 out of 28,121.

"A glance at the work done in the Home of the Friendless in this city will prove instructive. During the last six months of old school medication 62½ per cent of the babies died. During the first six months of Homeopathic medication 50 per cent died, and that, too, during the hottest half of the year. During 1891, 43¼ per cent of the foundlings died; in 1892, 37 per cent, and in 1893, 39 per cent. A saving of 20 per cent is worth something, even though the subjects be foundlings."

The statistics of the various penal institutions were then compared, which showed up favorably for the Homeopathists.

Every one who knows Dr. Walton can easily imagine the vinegar that was expressed in his usually sweet and melodious voice as he poured this hot shot into the enemy's already bleeding side, and it may be depended upon no one enjoyed the discomfiture caused by his caustic remarks more than did Dr. Walton. Slow to anger and plenteous in mercy he is vicious when stirred. And on this occasion he had been stirred.



Yours editorially

C. E. Fisher